

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

Date Report Requested: 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

Final 2 - Data Changes through 12-15-17 CDMA Core Rats Only

**NTP Study Number:** C20105B

**Lock Date:** 12/29/2015

**Cage Range:** ALL

**Date Range:** ALL

**Reasons For Removal:** 25022 ACCK 25021 TSAC 25020 NATD  
25019 MSAC

**Removal Date Range:** ALL

## **Treatment Groups:**

**Study Gender:** Both

TDMSE Version: 3.0.2.3\_002

**PWG Approval Date:**

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# ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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HARLAN SPRAGUE DAWLEY RATS MALE 0.0W/kg(CDMA)chr		DAY ON TEST	ANIMAL ID																								males (cont...)		
			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0			
		6	7	5	2	6	6	5	4	5	5	4	6	7	6	7	4	5	5	5	7	3	9	6	5	5	6	7	
		4	3	9	9	5	8	9	8	4	2	4	5	3	7	7	3	8	6	3	2	9	3	4	5	1	5	1	
		2	2	0	4	5	1	1	0	0	7	1	4	0	7	7	3	8	3	2	9	3	4	5	1	5	1		
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
		5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	
		0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2	2	2	3	3	
		1	2	3	4	6	9	0	1	1	2	3	4	5	6	7	8	9	0	1	2	2	3	4	5	2	3	3	
Bilateral, Pheochromocytoma Benign		X																											
Islets, Pancreatic Adenoma		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Carcinoma																													
Parathyroid Gland Adenoma		+	+	+	+	+	+	+	+	+	+	+	M	+	+	+	+	+	+	+	+	+	+		+	+	+	+	
Pituitary Gland Lymphoma Malignant		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
Pars Distalis, Adenoma		X												X	X	X								X		X	X	X	
Thyroid Gland C-cell, Adenoma		+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	+	
C-cell, Carcinoma																								X					
																								X					

## **GENERAL BODY SYSTEM**

## Tissue NOS

#### **Mediastinum, Schwannoma Malignant**

## **GENITAL SYSTEM**

### Bulbourethral Gland

## Ductus Deferens

## Epididymis

## Lymphoma Malignant

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HARLAN SPRAGUE DAWLEY RATS MALE 0.0W/kg(CDMA)chr		DAY ON TEST																								
			ANIMAL ID												males (cont...)											
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	7	5	2	6	6	6	5	4	5	5	4	6	7	6	7	4	5	5	5	7	7	6	5	5	5	0
4	3	9	9	5	8	9	8	4	2	4	1	5	3	7	3	9	6	5	5	1	3	3	4	6	5	1
2	2	0	4	5	1	1	0	0	7	1	4	0	7	7	3	8	3	2	9	3	4	5	1	5	1	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	
0	0	0	0	0	0	0	1	1	1	1	1	1	1	1	1	1	2	2	2	2	2	2	2	2	3	
1	2	3	4	6	9	0	1	2	3	4	5	6	7	8	9	0	1	2	2	3	4	7	2	9	0	

## HEMATOPOIETIC SYSTEM

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Lymph Node, Mesenteric  
Lymphoma Malignant

Spleen  
Hemangiosarcoma  
Lymphoma Malignant

## Thymus Lymphoma Malignant

+ + + + + + + + + + + + + + + | + + + + + + + + + + + + + + +

## **INTEGUMENTARY SYSTEM**

Mammary Gland  
Fibroadenoma  
Lymphoma Malignant

Skin  
Basal Cell Adenoma  
Keratoacanthoma  
Squamous Cell Papilloma  
Sebaceous Gland, Adenoma  
Subcutaneous Tissue  
Subcutaneous Tissue  
Subcutaneous Tissue  
Subcutaneous Tissue  
Subcutaneous Tissue

## MUSCULOSKELETAL SYSTEM

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+ .. Tissue examined microscopically

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M .. Missing tissue

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Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0.0W/kg(CDMA)chr |   | DAY ON TEST |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--|---|-------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
|  |   |             | males<br>(cont...) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| 0  | 0 | 0           | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| 6  | 7 | 5           | 2                  | 6 | 6 | 6 | 5 | 4 | 5 | 5 | 6 | 7 | 6 | 7 | 4 | 5 | 5 | 5 | 7 | 7 | 3 | 6 | 5 | 5 | 7 | 7 |  |
| 4  | 3 | 9           | 9                  | 5 | 8 | 9 | 8 | 4 | 2 | 4 | 5 | 3 | 7 | 3 | 9 | 6 | 5 | 5 | 1 | 3 | 4 | 2 | 9 | 3 | 6 | 5 |  |
| 2  | 2 | 0           | 4                  | 5 | 1 | 1 | 0 | 0 | 7 | 1 | 4 | 0 | 7 | 3 | 8 | 3 | 2 | 9 | 3 | 4 | 5 | 1 | 5 | 1 | 5 | 1 |  |
| 0  | 0 | 0           | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| 0  | 0 | 0           | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| 5  | 5 | 5           | 5                  | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |  |
| 0  | 0 | 0           | 0                  | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 |  |
| 1  | 2 | 3           | 4                  | 6 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 2 | 3 | 4 | 7 | 9 | 0 | 3 | 3 |  |
| Bone   |   |             | +                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Skeletal Muscle  |   |             | +                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymphoma Malignant                                     |   |             |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| <b>NERVOUS SYSTEM</b>                                  |   |             |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Brain  |   |             | +                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymphoma Malignant                                     |   |             |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Meninges, Granular Cell Tumor Benign                   |   |             |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Nerve Trigeminal                                       |   |             | +                  | + | + | + | + | + | M | + | + | I | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Peripheral Nerve, Sciatic                              |   |             | +                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Peripheral Nerve, Tibial                               |   |             | +                  | + | + | + | + | + | + | + | + | + | + | + | I | + | + | + | + | + | + | + | + | + | + | + |  |
| Spinal Cord, Cervical                                  |   |             | +                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymphoma Malignant                                     |   |             |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Spinal Cord, Lumbar                                    |   |             | +                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymphoma Malignant                                     |   |             |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Spinal Cord, Thoracic                                  |   |             | +                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymphoma Malignant                                     |   |             |                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Trigeminal Ganglion                                    |   |             | +                  | M | + | M | I | + | + | + | + | I | + | + | + | + | I | + | + | I | + | + | + | + | + | + |  |

## **RESPIRATORY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

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| DAY ON TEST                                |   | males<br>(cont...)      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE</b> |   | <b>0.0W/kg(CDMA)chr</b> |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|  |   | ANIMAL ID               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| 0  | 0 | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6  | 7 | 5                       | 2 | 6 | 6 | 6 | 5 | 4 | 5 | 5 | 6 | 7 | 6 | 7 | 4 | 5 | 5 | 7 | 7 | 5 | 7 |
| 4  | 3 | 9                       | 9 | 5 | 8 | 9 | 8 | 4 | 2 | 4 | 5 | 3 | 7 | 7 | 3 | 9 | 6 | 5 | 3 | 6 | 3 |
| 2  | 2 | 0                       | 4 | 5 | 1 | 0 | 0 | 0 | 7 | 1 | 4 | 0 | 7 | 3 | 8 | 3 | 2 | 9 | 3 | 4 | 5 |
| 0  | 0 | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 0  | 0 | 0                       | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 5  | 5 | 5                       | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |
| 0  | 0 | 0                       | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 3 |
| 1  | 2 | 3                       | 4 | 6 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 2 | 3 | 4 |

## Renal Tubule, Adenoma, Multiple

x

## Urinary Bladder Lymphoma Malignant

## **SYSTEMIC LESIONS**

Multiple Organ  
Lymphoma Malignant  
Mesothelioma Malignant

**males  
(cont...)**

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|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|--------------------|--|
|   |             | 0<br>7<br>2<br>1      | 0<br>7<br>3<br>3      | 0<br>5<br>1<br>0      | 0<br>7<br>1<br>0      | 0<br>6<br>3<br>0      | 0<br>5<br>8<br>3      | 0<br>5<br>6<br>0      | 0<br>7<br>0<br>4      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>4      | 0<br>6<br>6<br>2      | 0<br>7<br>0<br>5      | 0<br>7<br>3<br>1      | 0<br>6<br>6<br>2      | 0<br>7<br>3<br>5      | 0<br>6<br>3<br>1      | 0<br>7<br>6<br>2      | 0<br>5<br>8<br>2      | 0<br>5<br>9<br>5      |                       |   |                    |  |
| ANIMAL ID   |             | 0<br>0<br>5<br>3<br>4 | 0<br>0<br>5<br>3<br>5 | 0<br>0<br>5<br>3<br>6 | 0<br>0<br>5<br>3<br>7 | 0<br>0<br>5<br>4<br>0 | 0<br>0<br>5<br>4<br>1 | 0<br>0<br>5<br>4<br>2 | 0<br>0<br>5<br>4<br>3 | 0<br>0<br>5<br>4<br>4 | 0<br>0<br>5<br>4<br>5 | 0<br>0<br>5<br>4<br>6 | 0<br>0<br>5<br>4<br>7 | 0<br>0<br>5<br>4<br>8 | 0<br>0<br>5<br>5<br>0 | 0<br>0<br>5<br>5<br>1 | 0<br>0<br>5<br>5<br>2 | 0<br>0<br>5<br>5<br>3 | 0<br>0<br>5<br>5<br>4 | 0<br>0<br>5<br>5<br>5 | 0<br>0<br>5<br>5<br>6 | 0<br>0<br>5<br>5<br>7 | 0<br>0<br>5<br>5<br>8 | 0<br>0<br>5<br>5<br>9 |   |                    |  |
| Esophagus   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | +                  |  |
| Intestine Large, Cecum  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | A                  |  |
| Intestine Large, Colon<br>Lymphoma Malignant                                |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | A                  |  |
| Intestine Large, Rectum   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | A                  |  |
| Intestine Small, Duodenum   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | A                  |  |
| Intestine Small, Ileum  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | A                  |  |
| Intestine Small, Jejunum<br>Adenocarcinoma                                  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A | A                  |  |
| Liver<br>Lymphoma Malignant   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | A                  |  |
| Mesentery   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | +                  |  |
| Pancreas<br>Adenoma<br>Adenoma, Multiple<br>Carcinoma<br>Lymphoma Malignant |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | X                  |  |
| Salivary Glands   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | +                  |  |

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Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br><b>0.0W/kg(CDMA)chr</b> | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | <b>males<br/>(cont...)</b> |  |  |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------------|--|--|
|   |             | 0<br>7<br>2<br>1      | 0<br>7<br>3<br>3      | 0<br>5<br>1<br>0      | 0<br>7<br>3<br>0      | 0<br>6<br>6<br>3      | 0<br>5<br>8<br>0      | 0<br>5<br>6<br>7      | 0<br>7<br>3<br>4      | 0<br>7<br>0<br>4      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>6<br>6<br>2      | 0<br>7<br>0<br>5      | 0<br>7<br>3<br>1      | 0<br>6<br>6<br>2      | 0<br>7<br>3<br>5      | 0<br>6<br>3<br>1      | 0<br>7<br>8<br>5      | 0<br>5<br>8<br>2      | 0<br>5<br>9<br>5      |                       |                       |                            |  |  |
| ANIMAL ID   |             | 0<br>0<br>5<br>3<br>4 | 0<br>0<br>5<br>3<br>5 | 0<br>0<br>5<br>3<br>6 | 0<br>0<br>5<br>3<br>7 | 0<br>0<br>5<br>4<br>0 | 0<br>0<br>5<br>4<br>1 | 0<br>0<br>5<br>4<br>2 | 0<br>0<br>5<br>4<br>3 | 0<br>0<br>5<br>4<br>4 | 0<br>0<br>5<br>4<br>5 | 0<br>0<br>5<br>4<br>6 | 0<br>0<br>5<br>4<br>7 | 0<br>0<br>5<br>4<br>8 | 0<br>0<br>5<br>4<br>9 | 0<br>0<br>5<br>5<br>0 | 0<br>0<br>5<br>5<br>1 | 0<br>0<br>5<br>5<br>2 | 0<br>0<br>5<br>5<br>3 | 0<br>0<br>5<br>5<br>4 | 0<br>0<br>5<br>5<br>5 | 0<br>0<br>5<br>5<br>6 | 0<br>0<br>5<br>5<br>7 | 0<br>0<br>5<br>5<br>8 | 0<br>0<br>5<br>5<br>9 |                            |  |  |
| Mesothelioma Malignant  |             | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                            |  |  |
| Preputial Gland   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                          |  |  |
| Lymphoma Malignant  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                            |  |  |
| Prostate  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                          |  |  |
| Adenoma   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                            |  |  |
| Lymphoma Malignant  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                            |  |  |
| Seminal Vesicle   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                          |  |  |
| Lymphoma Malignant  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                            |  |  |
| Testis  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                          |  |  |
| Mesothelioma Malignant  |             |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                            |  |  |
| Interstitial Cell, Adenoma                                    |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                            |  |  |

**HEMATOPOIETIC SYSTEM**

|                                 |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------------------------|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bone Marrow                     |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |  |
| Lymphoma Malignant              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymph Node                      |  | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Bronchial, Lymphoma Malignant   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Iliac, Lymphoma Malignant       |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lumbar, Lymphoma Malignant      |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Mediastinal, Lymphoma Malignant |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymph Node, Mandibular          |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + |  |
| Lymphoma Malignant              |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br><b>0.0W/kg(CDMA)chr</b> | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  | <b>males<br/>(cont...)</b> |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|----------------------------|
|   |             | 0<br>7<br>2<br>1      | 0<br>7<br>3<br>3      | 0<br>5<br>1<br>0      | 0<br>7<br>3<br>0      | 0<br>6<br>3<br>0      | 0<br>5<br>8<br>0      | 0<br>5<br>6<br>7      | 0<br>7<br>3<br>4      | 0<br>7<br>0<br>4      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>6<br>6<br>2      | 0<br>7<br>0<br>5      | 0<br>7<br>3<br>1      | 0<br>6<br>6<br>2      | 0<br>7<br>3<br>5      | 0<br>6<br>3<br>1      | 0<br>7<br>8<br>5      | 0<br>5<br>8<br>2      | 0<br>5<br>9<br>5      |                       |  |                            |
| ANIMAL ID   |             | 0<br>0<br>5<br>3<br>4 | 0<br>0<br>5<br>3<br>5 | 0<br>0<br>5<br>3<br>6 | 0<br>0<br>5<br>4<br>0 | 0<br>0<br>5<br>4<br>1 | 0<br>0<br>5<br>4<br>2 | 0<br>0<br>5<br>4<br>3 | 0<br>0<br>5<br>4<br>4 | 0<br>0<br>5<br>4<br>5 | 0<br>0<br>5<br>4<br>6 | 0<br>0<br>5<br>4<br>7 | 0<br>0<br>5<br>4<br>8 | 0<br>0<br>5<br>4<br>9 | 0<br>0<br>5<br>5<br>0 | 0<br>0<br>5<br>5<br>1 | 0<br>0<br>5<br>5<br>2 | 0<br>0<br>5<br>5<br>3 | 0<br>0<br>5<br>5<br>4 | 0<br>0<br>5<br>5<br>5 | 0<br>0<br>5<br>5<br>6 | 0<br>0<br>5<br>5<br>7 | 0<br>0<br>5<br>5<br>8 | 0<br>0<br>5<br>5<br>9 |  |                            |

Lymph Node, Mesenteric  
Lymphoma MalignantSpleen  
Hemangiosarcoma  
Lymphoma MalignantThymus  
Lymphoma Malignant**INTEGUMENTARY SYSTEM**Mammary Gland  
Fibroadenoma  
Lymphoma MalignantSkin  
Basal Cell Adenoma  
Keratoacanthoma  
Squamous Cell Papilloma  
Sebaceous Gland, Adenoma  
Subcutaneous Tissue, Fibroma  
Subcutaneous Tissue, Fibrosarcoma  
Subcutaneous Tissue, Lipoma  
Subcutaneous Tissue, Lymphoma Malignant  
Subcutaneous Tissue, Sarcoma**MUSCULOSKELETAL SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **RESPIRATORY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br><b>0.0W/kg(CDMA)chr</b>         | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   | <b>males<br/>(cont...)</b> |   |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|----------------------------|---|
|   |             | 0<br>7<br>2<br>1      | 0<br>7<br>3<br>3      | 0<br>5<br>1<br>0      | 0<br>7<br>3<br>0      | 0<br>6<br>6<br>3      | 0<br>5<br>8<br>0      | 0<br>5<br>6<br>7      | 0<br>7<br>3<br>4      | 0<br>7<br>0<br>4      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>2      | 0<br>6<br>6<br>2      | 0<br>7<br>0<br>5      | 0<br>7<br>3<br>1      | 0<br>6<br>6<br>2      | 0<br>7<br>3<br>5      | 0<br>6<br>3<br>1      | 0<br>7<br>8<br>5      | 0<br>5<br>8<br>2      | 0<br>5<br>9<br>5      |                       |   |                            |   |
| ANIMAL ID   |             | 0<br>0<br>5<br>3<br>4 | 0<br>0<br>5<br>3<br>5 | 0<br>0<br>5<br>3<br>6 | 0<br>0<br>5<br>4<br>0 | 0<br>0<br>5<br>4<br>1 | 0<br>0<br>5<br>4<br>2 | 0<br>0<br>5<br>4<br>3 | 0<br>0<br>5<br>4<br>4 | 0<br>0<br>5<br>4<br>5 | 0<br>0<br>5<br>4<br>6 | 0<br>0<br>5<br>4<br>7 | 0<br>0<br>5<br>4<br>8 | 0<br>0<br>5<br>4<br>9 | 0<br>0<br>5<br>5<br>0 | 0<br>0<br>5<br>5<br>1 | 0<br>0<br>5<br>5<br>2 | 0<br>0<br>5<br>5<br>3 | 0<br>0<br>5<br>5<br>4 | 0<br>0<br>5<br>5<br>5 | 0<br>0<br>5<br>5<br>6 | 0<br>0<br>5<br>5<br>7 | 0<br>0<br>5<br>5<br>8 | 0<br>0<br>5<br>5<br>9 |   |                            |   |
| Lung  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + |                            |   |
| Alveolar/Bronchiolar Adenoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Lymphoma Malignant  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Nose  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + |                            |   |
| Schwannoma Malignant, Metastatic, Uncertain Primary Site              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Trachea   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + |                            |   |
| <b>SPECIAL SENSES SYSTEM</b>  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Eye   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + |                            |   |
| Retrobulbar, Schwannoma Malignant, Metastatic, Uncertain Primary Site |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            | X |
| Harderian Gland   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + |                            |   |
| Schwannoma Malignant, Metastatic, Uncertain Primary Site              |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            | X |
| Lacrimal Gland  |             | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| <b>URINARY SYSTEM</b>   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Kidney  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + |                            |   |
| Lipoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Lymphoma Malignant  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Oncocytoma Benign   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Bilateral, Renal Tubule, Adenoma, Multiple                            |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Bilateral, Renal Tubule, Carcinoma                                    |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |
| Renal Tubule, Adenoma   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |                            |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

## Cell Phone Radiation: CDMA

**Time Report Requested:** 13:31:21

**Route:** Whole Body Exposure

**CAS Number:** CELLPRADCDMA

**First Dose M/F:** 09/16/12 / 09/16/12

**Species/Strain:** RATS/HSD

Lab: IIT

| DAY ON TEST                                |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  | 0<br>7<br>2<br>1      | 0<br>7<br>3<br>3      | 0<br>5<br>1<br>0      | 0<br>7<br>1<br>0      | 0<br>6<br>3<br>4      | 0<br>6<br>8<br>3      | 0<br>5<br>0           | 0<br>7<br>7           | 0<br>6<br>4           | 0<br>0<br>4           | 0<br>7<br>2           | 0<br>7<br>3           | 0<br>7<br>0           | 0<br>7<br>3           | 0<br>7<br>4           | 0<br>6<br>2           | 0<br>7<br>5           | 0<br>7<br>1           | 0<br>6<br>2           | 0<br>7<br>5           | 0<br>6<br>3           | 0<br>5<br>2           | 0<br>5<br>5           |                       |                       |
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE</b> |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| <b>0.0W/kg(CDMA)chr</b>                    | 0<br>0<br>5<br>3<br>4 | 0<br>0<br>5<br>3<br>6 | 0<br>0<br>5<br>3<br>8 | 0<br>0<br>5<br>3<br>9 | 0<br>0<br>4<br>4<br>0 | 0<br>0<br>5<br>4<br>1 | 0<br>0<br>5<br>4<br>2 | 0<br>0<br>4<br>4<br>3 | 0<br>0<br>5<br>4<br>4 | 0<br>0<br>4<br>5<br>5 | 0<br>0<br>5<br>4<br>6 | 0<br>0<br>5<br>4<br>7 | 0<br>0<br>5<br>4<br>8 | 0<br>0<br>5<br>4<br>9 | 0<br>0<br>5<br>5<br>0 | 0<br>0<br>5<br>5<br>1 | 0<br>0<br>5<br>5<br>2 | 0<br>0<br>5<br>5<br>3 | 0<br>0<br>5<br>5<br>4 | 0<br>0<br>5<br>5<br>5 | 0<br>0<br>5<br>5<br>6 | 0<br>0<br>5<br>5<br>7 | 0<br>0<br>5<br>5<br>8 | 0<br>0<br>5<br>5<br>9 | 0<br>0<br>5<br>6<br>0 |
|  | ANIMAL ID             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | males<br>(cont...)    |                       |                       |                       |

## Renal Tubule, Adenoma, Multiple

## Urinary Bladder Lymphoma Malignant

## **SYSTEMIC LESIONS**

Multiple Organ  
Lymphoma Malignant  
Mesothelioma Malignant

4

**males**  
**(cont...)**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  |   |
| ANIMAL ID  | 6           | 7 | 6 | 7 | 7 | 6 | 7 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6                  | 6 |
|  | 6           | 3 | 6 | 3 | 1 | 4 | 2 | 5 | 6 | 0 | 9 | 1 | 2 | 2 | 4 | 2 | 3 | 3 | 0 | 1 | 7 | 7 | 7 | 4 | 2 | 7                  | 8 |
| 5  | 5           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5                  | 5 |
| 6  | 6           | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8                  | 8 |
| 1  | 2           | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 0 | 1 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 8                  |   |

## ALIMENTARY SYSTEM

Esophagus

Intestine Large, Cecum

Intestine Large, Colon  
Lymphoma Malignant

Intestine Large, Rectum

Intestine Small, Duodenum

Intestine Small, Ileum

Intestine Small, Jejunum  
AdenocarcinomaLiver  
Lymphoma Malignant

Mesentery

Pancreas  
Adenoma  
Adenoma, Multiple  
Carcinoma  
Lymphoma Malignant

Salivary Glands

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | A | + | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | + | + | A | A | + | + | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + | + | + | + | A | A | + | A | A | A | A | + | + | + | + | + | + | + | + | + | + |
| + | + | + | + | + | A | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
|                                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  |   |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE | 6 | 7 | 6 | 7 | 7 | 6 | 7 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6                  | 6 |
| 0.0W/kg(CDMA)chr                   | 6 | 3 | 6 | 3 | 1 | 4 | 2 | 5 | 6 | 6 | 0 | 9 | 1 | 2 | 2 | 4 | 2 | 2 | 4 | 7 | 7 | 7 | 2 | 4 | 7                  | 8 |
| ANIMAL ID                          | 2 | 3 | 3 | 2 | 5 | 1 | 2 | 9 | 6 | 4 | 1 | 2 | 1 | 2 | 2 | 4 | 2 | 2 | 4 | 7 | 7 | 7 | 2 | 4 | 7                  | 8 |
|                                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  | 0 |
|                                    | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  | 0 |
|                                    | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5                  | 5 |
|                                    | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8                  | 8 |
|                                    | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 0 | 1 | 3 | 4 | 5 | 6 | 7 | 8                  | 8 |

Bilateral, Pheochromocytoma Benign

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Islets, Pancreatic     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Carcinoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Parathyroid Gland      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Adenoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pituitary Gland        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pars Distalis, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Thyroid Gland          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| C-cell, Adenoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| C-cell, Carcinoma      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

## GENERAL BODY SYSTEM

|                                   |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----------------------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Tissue NOS                        | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mediastinum, Schwannoma Malignant |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## GENITAL SYSTEM

|                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Bulbourethral Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Ductus Deferens     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Epididymis          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymphoma Malignant  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDM

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **HEMATOPOIETIC SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X .. Lesion present

ANK .. Not examined microscopically

#### I .. Insufficient tissue

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDM

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

Lymph Node, Mesenteric  
Lymphoma Malignant

Spleen  
Hemangiosarcoma  
Lymphoma Malignant

## Thymus Lymphoma Malignant

## **INTEGUMENTARY SYSTEM**

Mammary Gland  
Fibroadenoma  
Lymphoma Malignant

+ + + + + + M M + X

Skin  
Basal Cell Adenoma  
Keratoacanthoma  
Squamous Cell Papilloma  
Sebaceous Gland, Adenoma  
Subcutaneous Tissue  
Subcutaneous Tissue  
Subcutaneous Tissue  
Subcutaneous Tissue  
Subcutaneous Tissue

## MUSCULOSKELETAL SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|   | DAY ON TEST             |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | <b>males<br/>(cont...)</b> |                            |  |
|---|-------------------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------------|----------------------------|--|
|   |                         | 0         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                          |                            |  |
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE</b>  | <b>0.0W/kg(CDMA)chr</b> | ANIMAL ID | 6 | 7 | 6 | 7 | 6 | 7 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6                          | <b>males<br/>(cont...)</b> |  |
|   |                         |           | 6 | 7 | 6 | 7 | 6 | 7 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6                          |                            |  |
| Bone  |                         |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                          |                            |  |
| Skeletal Muscle   |                         |           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                          |                            |  |
| Lymphoma Malignant  |                         |           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5                          |                            |  |
|   |                         |           | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6                          |                            |  |
|   |                         |           | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 0 | 1 | 3 | 4 | 5 | 6 | 7                          |                            |  |
| <b>NERVOUS SYSTEM</b>   |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| Brain   |                         |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                          |                            |  |
| Lymphoma Malignant  |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| Meninges, Granular Cell Tumor Benign  |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| Nerve Trigeminal  |                         |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                          |                            |  |
| Peripheral Nerve, Sciatic   |                         |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                          |                            |  |
| Peripheral Nerve, Tibial  |                         |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                          |                            |  |
| Spinal Cord, Cervical   |                         |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                          |                            |  |
| Lymphoma Malignant  |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| Spinal Cord, Lumbar   |                         |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                          |                            |  |
| Lymphoma Malignant  |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| Spinal Cord, Thoracic   |                         |           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                          |                            |  |
| Lymphoma Malignant  |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| Trigeminal Ganglion   |                         |           | M | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | I M                        |                            |  |
| <b>RESPIRATORY SYSTEM</b>   |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| * .. Total animals with tissue examined microscopically; Total animals with tumor |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| + .. Tissue examined microscopically  |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| X .. Lesion present   |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| I .. Insufficient tissue  |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| M .. Missing tissue   |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| A .. Autolysis precludes evaluation   |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |
| BLANK .. Not examined microscopically   |                         |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                            |                            |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

## 04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type:** CHRONIC

Cell Phone Radiation: CDMA

Time Report Requested: 13:31:21

#### **Route:** Whole Body Exposure

**CAS Number:** CEI | PRADCDMA

**First Dose M/F:** 09/16/12 / 09/16/12

**Species/Strain:** RATS/HSD

Lab: IIT

#### **Renal Tubule, Adenoma, Multiple**

## **SYSTEMIC LESIONS**

## Multiple Organ Lymphoma Malignant Mesothelioma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

# ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **GENERAL BODY SYSTEM**

Tissue NOS 3  
Mediastinum, Schwannoma Malignant 1

## **GENITAL SYSTEM**

|                     |   |   |    |
|---------------------|---|---|----|
| Bulbourethral Gland |   | + | 1  |
| Ductus Deferens     |   |   | 1  |
| Epididymis          | + | + | 90 |
| Lymphoma Malignant  | + | + | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID  | 2           | 6 | 5 | 7 | 5 | 6 | 7 | 6 | 6 | 5 | 6 | 4 | 6 | 7 | 6 | 7 | 6 |
|  | 4           | 5 | 6 | 3 | 1 | 1 | 3 | 8 | 4 | 5 | 4 | 9 | 0 | 7 | 0 | 2 | 9 |
|  | 8           | 8 | 9 | 4 | 0 | 6 | 3 | 8 | 8 | 5 | 5 | 6 | 0 | 5 | 9 | 6 | 8 |
| Mesothelioma Malignant                                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Preputial Gland  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Prostate   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Adenoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Seminal Vesicle  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Lymphoma Malignant                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Testis   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Mesothelioma Malignant                                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Interstitial Cell, Adenoma                             |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| <b>HEMATOPOIETIC SYSTEM</b>                            |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Bone Marrow  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Lymphoma Malignant                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node   |             |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   |   |
| Bronchial, Lymphoma Malignant                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Iliac, Lymphoma Malignant                              |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lumbar, Lymphoma Malignant                             |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mediastinal, Lymphoma Malignant                        |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymph Node, Mandibular                                 |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Lymphoma Malignant                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDM

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0.0W/kg(CDMA)chr |                                   | DAY ON TEST | ANIMAL ID |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--|-----------------------------------|-------------|-----------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| 0  | 0                                 | 0           | 0         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| 2  | 6                                 | 5           | 7         | 5 | 6 | 7 | 6 | 6 | 6 | 5 | 6 | 4 | 6 | 7 | 0 | 6 | 2 | 0 | 6 | 6 |  |
| 4  | 5                                 | 6           | 3         | 1 | 1 | 3 | 8 | 4 | 5 | 5 | 4 | 9 | 0 | 0 | 5 | 0 | 2 | 9 | 2 | 0 |  |
| 8  | 8                                 | 9           | 4         | 0 | 6 | 3 | 8 | 8 | 5 | 5 | 5 | 6 | 0 | 0 | 5 | 0 | 5 | 9 | 2 | 0 |  |
| 0  | 0                                 | 0           | 0         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| 0  | 0                                 | 0           | 0         | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| 5  | 5                                 | 5           | 5         | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |  |
| 8  | 9                                 | 9           | 9         | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |  |
| 9  | 1                                 | 2           | 3         | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 | 1 | 2 | 4 | 5 |   |   |   |   |   |  |
| <b>* TOTALS</b>  |                                   |             |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymph Node, Mesenteric                                 | + + + + + + + + + + + + + + + +   | 90          |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant                                     |                                   | 1           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Spleen   | + + + + + + + + + + + + + + + +   | 90          |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Hemangiosarcoma  |                                   | 3           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant                                     |                                   | 1           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Thymus   | + + + + + + + + + + + + + + + +   | 88          |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant                                     |                                   | 2           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| <b>INTEGUMENTARY SYSTEM</b>                            |                                   |             |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Mammary Gland  | + + + + M + + + + + + M + + + + + | 82          |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Fibroadenoma   |                                   | 2           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant                                     |                                   | 1           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Skin   | + + + + + + + + + + + + + + + +   | 90          |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Basal Cell Adenoma                                     |                                   | 1           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Keratoacanthoma  |                                   | 5           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Squamous Cell Papilloma                                | X                                 | 2           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Sebaceous Gland, Adenoma                               |                                   | 1           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Subcutaneous Tissue, Fibroma                           |                                   | 2           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Subcutaneous Tissue, Fibrosarcoma                      |                                   | 1           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Subcutaneous Tissue, Lipoma                            | X                                 | 2           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Subcutaneous Tissue, Lymphoma Malignant                |                                   | 1           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Subcutaneous Tissue, Sarcoma                           |                                   | 2           |           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

## MUSCULOSKELETAL SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumo

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

## Cell Phone Radiation: CDMA

**Time Report Requested:** 13:31:21

**Route:** Whole Body Exposure

**CAS Number:** CELLPRADCDMA

**First Dose M/F:** 09/16/12 / 09/16/12

**Species/Strain:** RATS/HSD

Lab: IIT

## **RESPIRATORY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

\* .. Total animals with tissue examined microscopically: Total animals with tumor

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X .. Lesion present

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**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

## Cell Phone Radiation: CDMA

**Time Report Requested:** 13:31:21

**Route:** Whole Body Exposure

**CAS Number:** CELLPRADCDMA

**First Dose M/F:** 09/16/12 / 09/16/12

**Species/Strain:** RATS/HSD

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>0.0W/kg(CDMA)chr |   | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| ANIMAL ID  |   |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 0 | 0           | 6 | 5 | 7 | 5 | 6 | 7 | 6 | 6 | 5 | 6 | 4 | 9 | 0 | 7 | 6 |   |
|  | 0 | 0           | 5 | 6 | 3 | 1 | 1 | 3 | 8 | 8 | 5 | 5 | 4 | 5 | 6 | 0 | 2 | 9 |
|  | 0 | 0           | 8 | 8 | 9 | 4 | 0 | 6 | 3 | 8 | 8 | 5 | 5 | 4 | 5 | 6 | 0 | 5 |
|  | 0 | 0           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 |
|  | 0 | 0           | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 0 | 0           | 9 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 | 1 | 2 | 4 | 5 |
|  | 0 | 0           | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 | 1 | 2 | 4 | 5 | 6 |
|  | 0 | 0           | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 | 1 | 2 | 4 | 5 | 6 |
|  | 0 | 0           | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 9 | 0 | 1 | 2 | 4 | 5 | 6 |

## **SYSTEMIC LESIONS**

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   | 2  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

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Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST                        |                  |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |
|------------------------------------|------------------|-----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
|                                    | 0<br>7           | 0<br>7    | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>6 | 0<br>5 | 0<br>5 | 0<br>5 | 0<br>7 | 0<br>6 | 0<br>6 | 0<br>6 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>7 | 0<br>7 |        |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE | 1.5W/kg(CDMA)chr | ANIMAL ID | 0<br>9 | 1<br>3 | 1<br>3 | 2<br>4 | 3<br>4 | 1<br>0 | 4<br>4 | 7<br>7 | 1<br>3 | 3<br>3 | 9<br>7 | 5<br>5 | 3<br>4 | 3<br>4 | 4<br>5 | 1<br>5 | 1<br>1 | 3<br>3 |
|                                    |                  |           | 0<br>3 | 1<br>1 |        |
|                                    |                  |           | 3<br>3 |        |
|                                    |                  |           | 4<br>4 | 4<br>4 | 4<br>4 | 4<br>4 | 5<br>5 | 5<br>6 | 6<br>6 | 7<br>7 |        |
|                                    |                  |           | 3<br>3 | 4<br>4 | 5<br>5 | 6<br>6 | 8<br>8 | 1<br>1 | 2<br>2 | 3<br>3 | 4<br>4 | 5<br>5 | 6<br>6 | 7<br>7 | 8<br>8 | 9<br>9 | 0<br>0 | 1<br>1 | 2<br>2 | 4<br>4 | 5<br>5 | 6<br>6 | 7<br>7 | 8<br>8 | 9<br>9 | 2<br>2 |

males  
(cont...)

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Cecum                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | A | + | + | + |
| Intestine Large, Colon                     | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | A | + | + | + |
| Intestine Large, Rectum                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | A | + | + | + |
| Intestine Small, Duodenum                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | A | + | + | + |
| Intestine Small, Ileum                     | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | A | + | + | A | + | + | + |
| Intestine Small, Jejunum<br>Adenocarcinoma | + | + | + | + | + | A | + | A | + | + | + | + | + | + | + | A | + | + | A | + | + | A | + | + | + |
| Liver                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hepatocellular Adenoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Leukemia Mononuclear                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + | + | + |   |   | + | + |
| Lymphoma Malignant                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |
| Oral Mucosa                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | + |   |   |   |   |   |   |
| Pancreas                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | X | + | + | + |
| Adenoma                                    | X |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | X |   |   | X |   |   | X |
| Adenoma, Multiple                          |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST             | males<br>(cont...) |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|--|-------------------------|--------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
|  |                         | 07                 | 07 | 07 | 07 | 06 | 07 | 06 | 05 | 05 | 05 | 07 | 06 | 06 | 06 | 07 | 07 | 07 | 06 | 07 | 07 | 06 | 07 | 07 | 07 |    |
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE</b> | <b>1.5W/kg(CDMA)chr</b> | ANIMAL ID          | 09 | 00 | 22 | 44 | 10 | 44 | 77 | 11 | 33 | 99 | 77 | 55 | 33 | 44 | 55 | 11 | 22 | 33 | 77 | 30 | 44 | 20 | 77 | 34 |
|  |                         |                    | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  | 0  |    |

Bilateral, Pheochromocytoma Benign

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Islets, Pancreatic                                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Carcinoma  | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Parathyroid Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adenoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pituitary Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Schwannoma Malignant, Metastatic, Tissue Nos             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Schwannoma Malignant, Metastatic, Uncertain Primary Site |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pars Distalis, Adenoma                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Thyroid Gland  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Bilateral, C-cell, Adenoma                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| C-cell, Adenoma  | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X |  |

**GENERAL BODY SYSTEM**

Tissue NOS

Schwannoma Malignant

**GENITAL SYSTEM**

Bulbourethral Gland

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|   | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | males<br>(cont...) |   |  |
|---|-------------|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------------------|---|--|
|   |             | 0<br>7   | 0<br>7                | 0<br>7                | 0<br>6                | 0<br>7                | 0<br>6                | 0<br>5                | 0<br>5                | 0<br>5                | 0<br>7                | 0<br>6                | 0<br>6                | 0<br>6                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>6                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>6                | 0<br>7                | 0<br>7                | 0<br>7                |                    |   |  |
|   | ANIMAL ID   | 0<br>1<br>3<br>4<br>3                                  | 1<br>1<br>3<br>4<br>4 | 0<br>1<br>3<br>3<br>3 | 0<br>1<br>3<br>5<br>5 |                    |   |  |
| Lymph Node, Mesenteric                  |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                  |   |  |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Spleen                                  |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                  |   |  |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Thymus                                  |             | +  | +                     | +                     | I                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                  |   |  |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| <b>INTEGUMENTARY SYSTEM</b>             |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Mammary Gland                           |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  | X |  |
| Fibroadenoma                            |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Skin                                    |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |  |
| Basal Cell Adenoma                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Keratoacanthoma                         |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Squamous Cell Papilloma                 |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Subcutaneous Tissue, Fibroma            |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Subcutaneous Tissue, Hemangiosarcoma    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Subcutaneous Tissue, Lipoma             |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Subcutaneous Tissue, Myxosarcoma        |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Subcutaneous Tissue, Neural Crest Tumor |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| <b>MUSCULOSKELETAL SYSTEM</b>           |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |   |  |
| Bone                                    |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |  |
| Skeletal Muscle                         |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically







**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **ALIMENTARY SYSTEM**

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**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **GENERAL BODY SYSTEM**

### Tissue NOS

### Schwannoma Malignant

## GENITAL SYSTEM

### Bulbourethral Gland

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

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**Experiment Number:** 20105 - 56

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**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr | DAY ON TEST           | ANIMAL ID             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |                    |                  |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|--------------------|------------------|
|  |                       |                       | 0<br>7<br>3<br>2      | 0<br>7<br>7<br>4      | 0<br>6<br>1<br>4      | 0<br>5<br>4<br>1      | 0<br>6<br>6<br>2      | 0<br>3<br>8<br>6      | 0<br>6<br>4<br>7      | 0<br>6<br>5<br>7      | 0<br>6<br>9<br>7      | 0<br>7<br>2<br>2      | 0<br>7<br>5<br>5      | 0<br>7<br>3<br>3      | 0<br>6<br>1<br>6      | 0<br>7<br>1<br>1      | 0<br>7<br>3<br>2      | 0<br>7<br>1<br>1      | 0<br>7<br>3<br>3      | 0<br>7<br>7<br>7      | 0<br>6<br>5<br>5      | 0<br>5<br>2<br>5      | 0<br>7<br>3<br>1 | 0<br>5<br>5<br>2   |                  |
| 0<br>1<br>3<br>7<br>4                                  | 0<br>1<br>3<br>7<br>5 | 0<br>1<br>3<br>7<br>6 | 0<br>1<br>3<br>7<br>8 | 0<br>1<br>3<br>8<br>0 | 0<br>1<br>3<br>8<br>1 | 0<br>1<br>3<br>8<br>2 | 0<br>1<br>3<br>8<br>3 | 0<br>1<br>3<br>8<br>4 | 0<br>1<br>3<br>8<br>5 | 0<br>1<br>3<br>8<br>6 | 0<br>1<br>3<br>8<br>7 | 0<br>1<br>3<br>8<br>8 | 0<br>1<br>3<br>8<br>9 | 0<br>1<br>3<br>9<br>0 | 0<br>1<br>3<br>9<br>1 | 0<br>1<br>3<br>9<br>2 | 0<br>1<br>3<br>9<br>3 | 0<br>1<br>3<br>9<br>4 | 0<br>1<br>3<br>9<br>5 | 0<br>1<br>3<br>9<br>6 | 0<br>1<br>3<br>9<br>8 | 0<br>1<br>3<br>9<br>9 | 0<br>1<br>3<br>0 | 0<br>1<br>4<br>0   | 0<br>1<br>4<br>0 |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  | males<br>(cont...) |                  |

## Coagulating Gland

Epididymis  
Mesothelioma Malignant

## Penis

## Preputial Gland

## Prostate

### Seminal Vesicle

Testis  
Mesothelioma Malignant  
Interstitial Cell, Adenoma

**males**  
**(cont...)**

## HEMATOPOIETIC SYSTEM

Bone Marrow  
Leukemia Mononuclear  
Lymphoma Malignant

Lymph Node  
  Mediastinal, Lymphoma Malignant  
  Pancreatic, Lymphoma Malignant

## Lymph Node, Mandibular Lymphoma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

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**Date Report Requested:** 01/02/2018

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 6           | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 4 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 7 | 7 | 6 | 7 | 6 | 7 | 7 |
| 9           | 3 | 1 | 3 | 3 | 3 | 3 | 3 | 3 | 9 | 3 | 3 | 3 | 0 | 3 | 3 | 3 | 0 | 3 | 5 | 3 | 3 | 0 | 9 | 3 | 1 |
| 5           | 4 | 7 | 4 | 1 | 2 | 2 | 4 | 3 | 1 | 1 | 3 | 3 | 4 | 3 | 3 | 2 | 3 | 3 | 0 | 0 | 1 | 3 | 1 | 9 | 9 |
| 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| 4           | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 |
| 0           | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 |
| 2           | 3 | 5 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |

males  
(cont...)

Carcinoma

X

Lymphoma Malignant

Pheochromocytoma Malignant, Metastatic,

Adrenal Medulla

Salivary Glands

+ +

Stomach, Forestomach

+ +

Stomach, Glandular

+ A + +

## CARDIOVASCULAR SYSTEM

Aorta

+ +

Blood Vessel

Heart

+ +

Endocardium, Schwannoma Malignant

Myocardium, Schwannoma Malignant

## ENDOCRINE SYSTEM

Adrenal Cortex

+ +

Adenoma

Carcinoma

X X

Adrenal Medulla

+ +

Pheochromocytoma Benign

X X X X

Pheochromocytoma Benign, Multiple

Pheochromocytoma Malignant

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

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BLANK .. Not examined microscopically

I .. Insufficient tissue

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| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |                    |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|--------------------|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |                    |                    |
| ANIMAL ID  | 6           | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 4 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 5 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 7 | 7                  | males<br>(cont...) |
|  | 9           | 3 | 1 | 3 | 3 | 3 | 3 | 3 | 4 | 9 | 3 | 3 | 0 | 3 | 3 | 2 | 3 | 3 | 0 | 3 | 3 | 0 | 3 | 0 | 3 | 1                  |                    |
|  | 5           | 4 | 7 | 4 | 1 | 2 | 2 | 4 | 3 | 1 | 1 | 3 | 3 | 4 | 3 | 3 | 2 | 3 | 3 | 8 | 3 | 3 | 0 | 3 | 1 | 9                  |                    |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  |                    |
|  | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1                  |                    |
|  | 4           | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4                  |                    |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3                  |                    |
|  | 2           | 3 | 5 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |                    |                    |

Bilateral, Pheochromocytoma Benign

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Islets, Pancreatic | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + |  |
| Adenoma            | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |  |
| Carcinoma          |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |  |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

Parathyroid Gland

|         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Adenoma | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + |
|---------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

Pituitary Gland

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Schwannoma Malignant, Metastatic, Tissue Nos             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X |  |
| Schwannoma Malignant, Metastatic, Uncertain Primary Site |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pars Distalis, Adenoma                                   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   |   |   |   | X | X | X | X |   |   |   |   |  |

Thyroid Gland

|                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bilateral, C-cell, Adenoma | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| C-cell, Adenoma            | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   |   |   | X |

## GENERAL BODY SYSTEM

Tissue NOS

+

Schwannoma Malignant

X

## GENITAL SYSTEM

Bulbourethral Gland

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue











Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |             | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>6<br>0<br>3      | 0<br>7<br>6<br>5      | 0<br>6<br>1<br>0      | 0<br>6<br>6<br>2      | 0<br>4<br>4<br>7      | 0<br>4<br>0<br>4      | 0<br>6<br>1<br>5      | 0<br>5<br>9<br>7      | 0<br>7<br>1<br>7      | 0<br>5<br>8<br>2      | 0<br>5<br>7<br>7      | 0<br>5<br>1<br>7      | 0<br>5<br>2<br>2      |
| ANIMAL ID  |             | 0<br>1<br>4<br>3<br>1 | 0<br>1<br>4<br>3<br>2 | 0<br>1<br>4<br>3<br>3 | 0<br>1<br>4<br>3<br>4 | 0<br>1<br>4<br>3<br>5 | 0<br>1<br>4<br>3<br>6 | 0<br>1<br>4<br>3<br>7 | 0<br>1<br>4<br>3<br>8 | 0<br>1<br>4<br>3<br>9 | 0<br>1<br>4<br>4<br>0 | 0<br>1<br>4<br>4<br>1 | 0<br>1<br>4<br>4<br>2 | 0<br>1<br>4<br>4<br>3 | 0<br>1<br>4<br>4<br>4 | 0<br>1<br>4<br>4<br>5 | 0<br>1<br>4<br>4<br>6 |
|  |             | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     | *                     |
|  |             | * TOTALS              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |         |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---------|
| Esophagus                                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90      |
| Intestine Large, Cecum                     | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | 76      |
| Intestine Large, Colon                     | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | 83      |
| Intestine Large, Rectum                    | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | 81      |
| Intestine Small, Duodenum                  | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | 84      |
| Intestine Small, Ileum                     | + | + | A | + | + | + | + | + | + | + | A | + | + | + | + | + | 76      |
| Intestine Small, Jejunum<br>Adenocarcinoma | + | + | + | A | + | + | + | + | + | + | A | + | + | + | + | + | 73<br>1 |
| Liver                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90      |
| Hepatocellular Adenoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2       |
| Leukemia Mononuclear                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2       |
| Lymphoma Malignant                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2       |
| Mesentery                                  |   |   |   |   |   |   | + |   |   |   |   | + | + | + | + | + | 19      |
| Lymphoma Malignant                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1       |
| Oral Mucosa                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1       |
| Pancreas                                   | + | + | + | + | + | + | + | X | + | + | + | + | + | + | + | + | 88      |
| Adenoma                                    |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 16      |
| Adenoma, Multiple                          |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   | 6       |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
|--|-------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|
|  |                         | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>5 | 0<br>6 | 0<br>6 | 0<br>4 | 0<br>4 | 0<br>4 | 0<br>6 | 0<br>5 | 0<br>7 | 0<br>5   |
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE</b>                 | <b>1.5W/kg(CDMA)chr</b> |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
|  |                         | 0<br>3 | 0<br>3 | 0<br>3 | 0<br>3 | 0<br>6 | 0<br>0 | 0<br>6 | 1<br>0 | 6<br>2 | 4<br>7 | 0<br>4 | 1<br>5 | 9<br>7 | 1<br>7 | 8<br>2 |          |
| ANIMAL ID  |                         | 0<br>0 | 1<br>2 | 0<br>0 | 0<br>3 | 5<br>5 | 8<br>0 | 0<br>2 | 2<br>7 | 7<br>4 | 4<br>4 | 5<br>5 | 7<br>7 | 7<br>7 | 2<br>2 | 5<br>5 |          |
|  |                         | 0<br>1 | 1<br>4 | 0<br>4 | * TOTALS |
| Carcinoma  |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Lymphoma Malignant   |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Pheochromocytoma Malignant, Metastatic,<br>Adrenal Medulla |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Salivary Glands  |                         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90       |
| Stomach, Forestomach                                       |                         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90       |
| Stomach, Glandular   |                         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 86       |
| <b>CARDIOVASCULAR SYSTEM</b>                               |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Aorta  |                         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90       |
| Blood Vessel   |                         |        |        |        |        |        |        | +      |        |        |        |        |        |        |        |        | 2        |
| Heart  |                         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90       |
| Endocardium, Schwannoma Malignant                          |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Myocardium, Schwannoma Malignant                           |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| <b>ENDOCRINE SYSTEM</b>                                    |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |
| Adrenal Cortex   |                         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90       |
| Adenoma  |                         |        | X      |        | X      |        |        |        |        |        |        |        |        |        |        |        | 3        |
| Carcinoma  |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |
| Adrenal Medulla  |                         | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90       |
| Pheochromocytoma Benign                                    |                         |        | X      | X      |        |        |        |        |        |        |        |        |        |        |        |        | 17       |
| Pheochromocytoma Benign, Multiple                          |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |
| Pheochromocytoma Malignant                                 |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 3        |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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A .. Autolysis precludes evaluation

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Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |
|--|-------------------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
|  |                         | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>5 | 0<br>6 | 0<br>6 | 0<br>4 | 0<br>4 | 0<br>4 | 0<br>6 | 0<br>5 | 0<br>7 | 0<br>5 |
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE</b>               | <b>1.5W/kg(CDMA)chr</b> |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |
|  |                         | 0<br>1 | 0<br>0 |
| ANIMAL ID  |                         | 0<br>1 | 1<br>4 | 4<br>3 | 4<br>4 |
|  |                         | 1<br>1 | 2<br>2 | 3<br>3 |
|  |                         | 1<br>1 | 2<br>2 | 3<br>3 |
|  |                         | 1<br>1 | 2<br>2 | 3<br>3 |
| Bilateral, Pheochromocytoma Benign                       | X                       |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |
| Islets, Pancreatic                                       | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 88     |
| Adenoma  |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 11     |
| Carcinoma  |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 6      |
| Lymphoma Malignant                                       |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |
| Parathyroid Gland  | +                       | +      | +      | +      | M      | +      | M      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 83     |
| Adenoma  |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |
| Pituitary Gland  | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90     |
| Schwannoma Malignant, Metastatic, Tissue Nos             |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |
| Schwannoma Malignant, Metastatic, Uncertain Primary Site |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1      |
| Pars Distalis, Adenoma                                   | X                       | X      | X      | X      | X      | X      |        | X      |        |        |        |        |        |        |        |        | 25     |
| Thyroid Gland  | +                       | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 87     |
| Bilateral, C-cell, Adenoma                               |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2      |
| C-cell, Adenoma  |                         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 12     |

**GENERAL BODY SYSTEM**

|                      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|----------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Tissue NOS           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |
| Schwannoma Malignant |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |

**GENITAL SYSTEM**

|                     |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|---------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Bulbourethral Gland |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |
|---------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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X .. Lesion present

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| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr | DAY ON TEST                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |
|--|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----|
|  |                                 | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>6<br>0<br>3      | 0<br>7<br>6<br>5      | 0<br>6<br>1<br>0      | 0<br>6<br>6<br>2      | 0<br>4<br>4<br>7      | 0<br>4<br>0<br>4      | 0<br>6<br>1<br>5      | 0<br>5<br>9<br>7      | 0<br>7<br>1<br>7      | 0<br>5<br>8<br>2      | 0<br>5<br>7<br>2      |          |    |
| ANIMAL ID  |                                 | 0<br>1<br>4<br>3<br>1 | 0<br>1<br>4<br>3<br>2 | 0<br>1<br>4<br>3<br>3 | 0<br>1<br>4<br>3<br>4 | 0<br>1<br>4<br>3<br>5 | 0<br>1<br>4<br>3<br>6 | 0<br>1<br>4<br>3<br>7 | 0<br>1<br>4<br>3<br>8 | 0<br>1<br>4<br>3<br>9 | 0<br>1<br>4<br>4<br>0 | 0<br>1<br>4<br>4<br>1 | 0<br>1<br>4<br>4<br>2 | 0<br>1<br>4<br>4<br>3 | 0<br>1<br>4<br>4<br>4 | * TOTALS |    |
|  | Coagulating Gland               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  | Epididymis                      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |          | 90 |
|  | Mesothelioma Malignant          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  | Penis                           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 4  |
|  | Preputial Gland                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |          | 88 |
| TESTES   | Prostate                        | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |          | 90 |
|  | Seminal Vesicle                 | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |          | 90 |
|  | Testis                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |          | 89 |
|  | Mesothelioma Malignant          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1  |
| HEMATOPOIETIC SYSTEM                                   | Interstitial Cell, Adenoma      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  | Bone Marrow                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |          | 90 |
|  | Leukemia Mononuclear            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  | Lymphoma Malignant              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  | Lymph Node                      | +                     | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 23 |
|  | Mediastinal, Lymphoma Malignant |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
| LYMPH NODES  | Pancreatic, Lymphoma Malignant  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1  |
|  | Lymph Node, Mandibular          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |          | 90 |
|  | Lymphoma Malignant              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr   | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|----------|
|  |             | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>6<br>0<br>3      | 0<br>7<br>6<br>5      | 0<br>6<br>1<br>0      | 0<br>6<br>6<br>2      | 0<br>4<br>4<br>7      | 0<br>4<br>0<br>4      | 0<br>6<br>1<br>5      | 0<br>5<br>9<br>7      | 0<br>7<br>1<br>7      | 0<br>5<br>8<br>2      |                       |                       |   |          |
| ANIMAL ID  |             | 0<br>1<br>4<br>3<br>1 | 0<br>1<br>4<br>3<br>2 | 0<br>1<br>4<br>3<br>3 | 0<br>1<br>4<br>3<br>4 | 0<br>1<br>4<br>3<br>5 | 0<br>1<br>4<br>3<br>6 | 0<br>1<br>4<br>3<br>7 | 0<br>1<br>4<br>3<br>8 | 0<br>1<br>4<br>3<br>9 | 0<br>1<br>4<br>4<br>0 | 0<br>1<br>4<br>4<br>1 | 0<br>1<br>4<br>4<br>2 | 0<br>1<br>4<br>4<br>3 | 0<br>1<br>4<br>4<br>4 | 0<br>1<br>4<br>4<br>5 |   | * TOTALS |
| Lymph Node, Mesenteric<br>Lymphoma Malignant   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 89<br>2                                     |          |
| Spleen<br>Leukemia Mononuclear<br>Lymphoma Malignant   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90<br>2<br>2                                |          |
| Thymus<br>Lymphoma Malignant   |             | +                     | M                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 85<br>2                                     |          |
| <b>INTEGUMENTARY SYSTEM</b>  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |          |
| Mammary Gland<br>Fibroadenoma  |             | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | 77<br>5                                     |          |
| Skin<br>Basal Cell Adenoma<br>Keratoacanthoma<br>Squamous Cell Papilloma<br>Subcutaneous Tissue, Fibroma<br>Subcutaneous Tissue, Hemangiosarcoma<br>Subcutaneous Tissue, Lipoma<br>Subcutaneous Tissue, Myxosarcoma<br>Subcutaneous Tissue, Neural Crest Tumor |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90<br>1<br>4<br>1<br>11<br>1<br>5<br>2<br>1 |          |
| Bone   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90  |          |
| Skeletal Muscle  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90  |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr   | DAY ON TEST                     |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
|--|---------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
|  |                                 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>0 | 0<br>6<br>0<br>3 | 0<br>7<br>6<br>5 | 0<br>6<br>1<br>0 | 0<br>6<br>6<br>2 | 0<br>4<br>4<br>7 | 0<br>4<br>0<br>4 | 0<br>6<br>1<br>5 | 0<br>5<br>9<br>7 | 0<br>7<br>1<br>7 | 0<br>5<br>8<br>2 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 | 0<br>0<br>0<br>0 |
| ANIMAL ID  |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS         |
|  | Hemangioma                      |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| <b>NERVOUS SYSTEM</b>                                    |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
| Brain  | + + + + + + + + + + + + + + + + |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 90               |
| Leukemia Mononuclear                                     |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2                |
| Lymphoma Malignant                                       |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| Schwannoma Malignant, Metastatic, Tissue Nos             |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| Schwannoma Malignant, Metastatic, Uncertain Primary Site |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| Meninges, Granular Cell Tumor Malignant                  |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| Meninges, Lymphoma Malignant                             |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| Nerve Trigeminal   | + + + + + + + + + + + + + + + + |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 90               |
| Peripheral Nerve, Sciatic                                | + + + + + + + + + + + + + + + + |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 90               |
| Peripheral Nerve, Tibial                                 | + + + + + + + + + + + + + + + + |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 90               |
| Spinal Cord, Cervical                                    | + + + + + + + + + + + + + + + + |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 90               |
| Leukemia Mononuclear                                     |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| Spinal Cord, Lumbar                                      | + + + + + + + + + + + + + + + + |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 90               |
| Leukemia Mononuclear                                     |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| Spinal Cord, Thoracic                                    | + + + + + + + + + + + + + + + + |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 90               |
| Leukemia Mononuclear                                     |                                 |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1                |
| Trigeminal Ganglion                                      | M M + + +   M + + M + + + + +   |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 77               |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |             |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-------------|
|  | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>6                | 0<br>7                | 0<br>5                | 0<br>6                | 0<br>6                | 0<br>4                | 0<br>4                | 0<br>4                | 0<br>6                | 0<br>5                | 0<br>7                | 0<br>5      |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr | 0<br>3<br>0           | 2<br>3<br>0           | 0<br>3<br>0           | 0<br>6<br>3           | 0<br>0<br>5           | 0<br>6<br>8           | 0<br>1<br>0           | 0<br>6<br>2           | 0<br>4<br>7           | 0<br>4<br>4           | 0<br>5<br>5           | 0<br>1<br>5           | 0<br>9<br>7           | 0<br>1<br>7           | 0<br>1<br>7           | 0<br>2<br>2 |
| ANIMAL ID  | 0<br>1<br>4<br>3<br>1 | 0<br>1<br>4<br>3<br>2 | 0<br>1<br>4<br>3<br>3 | 0<br>1<br>4<br>3<br>4 | 0<br>1<br>4<br>3<br>5 | 0<br>1<br>4<br>3<br>6 | 0<br>1<br>4<br>3<br>7 | 0<br>1<br>4<br>3<br>8 | 0<br>1<br>4<br>3<br>9 | 0<br>1<br>4<br>4<br>0 | 0<br>1<br>4<br>4<br>1 | 0<br>1<br>4<br>4<br>2 | 0<br>1<br>4<br>4<br>3 | 0<br>1<br>4<br>4<br>4 | 0<br>1<br>4<br>4<br>5 |             |
|  | * TOTALS              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |             |
| Schwannoma Malignant, Metastatic, Tissue<br>Nos        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |             |
|  | 1                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |             |

## RESPIRATORY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Alveolar/Bronchiolar Adenoma                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Leukemia Mononuclear  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Lymphoma Malignant  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Nose  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Schwannoma Malignant, Metastatic, Uncertain<br>Primary Site |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Trachea   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 88 |

## SPECIAL SENSES SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Eye   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 83 |
| Schwannoma Malignant, Metastatic, Uncertain<br>Primary Site |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Harderian Gland   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Schwannoma Malignant, Metastatic, Tissue<br>Nos             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Schwannoma Malignant, Metastatic, Uncertain<br>Primary Site |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lacrimal Gland  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## URINARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor  
+ .. Tissue examined microscopically  
X .. Lesion present  
I .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>1.5W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|--|
|  |             | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>6<br>0<br>3      | 0<br>7<br>6<br>5      | 0<br>6<br>1<br>0      | 0<br>6<br>6<br>2      | 0<br>4<br>4<br>7      | 0<br>4<br>0<br>4      | 0<br>6<br>1<br>5      | 0<br>5<br>9<br>7      | 0<br>7<br>1<br>7      | 0<br>5<br>8<br>2      |                       |                       |  |  |
| ANIMAL ID  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|  | 0           | 0<br>1<br>4<br>3<br>1 | 0<br>1<br>4<br>3<br>2 | 0<br>1<br>4<br>3<br>3 | 0<br>1<br>4<br>3<br>4 | 0<br>1<br>4<br>3<br>5 | 0<br>1<br>4<br>3<br>6 | 0<br>1<br>4<br>3<br>7 | 0<br>1<br>4<br>3<br>8 | 0<br>1<br>4<br>3<br>9 | 0<br>1<br>4<br>4<br>0 | 0<br>1<br>4<br>4<br>1 | 0<br>1<br>4<br>4<br>2 | 0<br>1<br>4<br>4<br>3 | 0<br>1<br>4<br>4<br>4 | 0<br>1<br>4<br>4<br>5 |  |  |
|  | 1           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|  | 4           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|  | 3           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|  | 1           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |

\* TOTALS

|                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lipoma                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Lymphoma Malignant    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Renal Tubule, Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Urinary Bladder       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 83 |

## SYSTEMIC LESIONS

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Leukemia Mononuclear   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   | males<br>(cont...) |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|---|--------------------|--|
|  |             | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>6<br>8<br>8      | 0<br>7<br>2<br>0      | 0<br>6<br>2<br>0      | 0<br>7<br>3<br>0      | 0<br>6<br>2<br>3      | 0<br>5<br>9<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>4      | 0<br>4<br>7<br>1      | 0<br>7<br>3<br>7      | 0<br>6<br>1<br>9      | 0<br>6<br>6<br>4      | 0<br>6<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      |                       |                       |   |   |                    |  |
| ANIMAL ID  |             | 0<br>1<br>5<br>5<br>5 |   |   |                    |  |
| Esophagus  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |  |
| Intestine Large, Cecum                                 |             | +                     | +                     | +                     | +                     | A                     | +                     | A                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | A                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | A | + |                    |  |
| Intestine Large, Colon                                 |             | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |  |
| Intestine Large, Rectum                                |             | +                     | +                     | +                     | +                     | A                     | +                     | A                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | A | + |                    |  |
| Intestine Small, Duodenum                              |             | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |  |
| Adenocarcinoma   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |   |   |                    |  |
| Lymphoma Malignant                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |   |   |                    |  |
| Osteosarcoma   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |   |   |                    |  |
| Intestine Small, Ileum                                 |             | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | + |   |                    |  |
| Intestine Small, Jejunum                               |             | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | A                     | +                     | A                     | +                     | +                     | +                     | +                     | A                     | + |   |                    |  |
| Liver  |             | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | X                     |                       |                       |                       |                       |                       |                       |   |   |                    |  |
| Hepatocellular Adenoma                                 |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |   |   |                    |  |
| Hepatocellular Carcinoma                               |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |   |   |                    |  |
| Leukemia Mononuclear                                   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |   |   |                    |  |
| Lymphoma Malignant                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |   |   |                    |  |
| Mesentery  |             |                       |                       |                       |                       |                       | +                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     |                       |                       |                       |                       |                       |   |   |                    |  |
| Mesothelioma Malignant                                 |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     |                       |                       |                       |                       |   |   |                    |  |
| Oral Mucosa  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     |                       |                       |                       |   |   |                    |  |
| Squamous Cell Carcinoma                                |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     |                       |                       |                       |   |   |                    |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

Stomach, Forestomach                    +  
Lymphoma Malignant                    X  
Squamous Cell Carcinoma                X

## CARDIOVASCULAR SYSTEM

## Blood Vessel

Heart

## Leukemia Mononuclear Lymphoma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically









Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|   | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   | males<br>(cont...) |
|---|-------------|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|---|--------------------|
|   |             | 0<br>7<br>3<br>1                                       | 0<br>7<br>3<br>3      | 0<br>6<br>8<br>8      | 0<br>7<br>2<br>0      | 0<br>6<br>1<br>0      | 0<br>7<br>3<br>2      | 0<br>6<br>3<br>0      | 0<br>7<br>3<br>4      | 0<br>5<br>9<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>1      | 0<br>6<br>6<br>4      | 0<br>6<br>1<br>4      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>0      |                       |                       |   |   |                    |
|   | ANIMAL ID   | 0<br>1<br>5<br>5<br>5                                  | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 |   |   |                    |
| Brain                                   |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | X |                    |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Meningioma Benign                       |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Meninges, Granular Cell Tumor Benign    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Meninges, Granular Cell Tumor Malignant |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Nerve Trigeminal                        |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Peripheral Nerve, Sciatic               |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | I                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |
| Peripheral Nerve, Tibial                |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |
| Spinal Cord, Cervical                   |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Spinal Cord, Lumbar                     |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Spinal Cord, Thoracic                   |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |
| Trigeminal Ganglion                     |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                    |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                    |

## RESPIRATORY SYSTEM

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Lung | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

Alveolar/Bronchiolar Adenoma \* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically A .. Autolysis precludes evaluation

X .. Lesion present BLANK .. Not examined microscopically

I .. Insufficient tissue



**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE | 3.0W/kg(CDMA)chr | DAY ON TEST | ANIMAL ID |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|------------------------------------|------------------|-------------|-----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|                                    |                  |             |           | 0<br>7<br>3<br>1      | 0<br>7<br>8<br>3      | 0<br>6<br>8<br>8      | 0<br>7<br>2<br>0      | 0<br>6<br>3<br>2      | 0<br>7<br>4<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>5<br>9<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>1      | 0<br>7<br>1<br>7      | 0<br>6<br>6<br>4      | 0<br>6<br>6<br>4      | 0<br>6<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>1      |
|                                    |                  |             |           | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>5 | 0<br>1<br>5<br>5<br>6 | 0<br>1<br>5<br>6<br>6 | 0<br>1<br>5<br>6<br>6 | 0<br>1<br>5<br>6<br>6 | 0<br>1<br>5<br>6<br>6 | 0<br>1<br>5<br>6<br>6 | 0<br>1<br>5<br>6<br>7 |
|                                    |                  |             |           | 1<br>2                | 3<br>3                | 4<br>4                | 5<br>5                | 6<br>6                | 7<br>7                | 9<br>9                | 0<br>0                | 1<br>2                | 3<br>3                | 4<br>4                | 5<br>5                | 6<br>6                | 7<br>7                | 9<br>9                | 0<br>0                | 1<br>1                | 2<br>2                | 3<br>3                | 4<br>4                | 5<br>5                |

Bilateral, Renal Tubule, Carcinoma

## Urinary Bladder

## **Leukemia Mononuclear Lymphoma Malignant**

X

## **SYSTEMIC LESIONS**

## Multiple Organ

Leukemia Mononuclear  
Lymphoma Malignant  
Mesothelioma Malignant

x

**males**  
**(cont...)**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | males<br>(cont...)    |                       |                       |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |                       | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>1      | 0<br>7<br>5<br>5      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>3      | 0<br>6<br>6<br>6      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>4      |                       |                       |                       |                       |                       |
| ANIMAL ID  | 0<br>1<br>5<br>7<br>8 | 0<br>1<br>5<br>8<br>9 | 0<br>1<br>5<br>8<br>0 | 0<br>1<br>5<br>8<br>2 | 0<br>1<br>5<br>8<br>3 | 0<br>1<br>5<br>8<br>4 | 0<br>1<br>5<br>8<br>5 | 0<br>1<br>5<br>8<br>6 | 0<br>1<br>5<br>8<br>7 | 0<br>1<br>5<br>8<br>8 | 0<br>1<br>5<br>9<br>9 | 0<br>1<br>5<br>9<br>0 | 0<br>1<br>5<br>9<br>1 | 0<br>1<br>5<br>9<br>2 | 0<br>1<br>5<br>9<br>3 | 0<br>1<br>5<br>9<br>4 | 0<br>1<br>6<br>0<br>7 | 0<br>1<br>6<br>0<br>0 | 0<br>1<br>6<br>0<br>2 | 0<br>1<br>6<br>0<br>4 | 0<br>1<br>6<br>0<br>5 | 0<br>1<br>6<br>0<br>6 | 0<br>1<br>6<br>0<br>7 | 0<br>1<br>6<br>0<br>8 |

Stomach, Forestomach                            +    +    +    +    A    +    +    +    +    +    +    +    +    +    +    +    +    +    +    +    +    +    +  
Lymphoma Malignant  
Squamous Cell Carcinoma

## CARDIOVASCULAR SYSTEM

Blood Vessel

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically









Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|   | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | males<br>(cont...)    |                       |                       |   |
|---|-------------|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|
|   |             | 0<br>7<br>3<br>1                                       | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>1      | 0<br>5<br>3<br>5      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>2      | 0<br>3<br>3<br>3      | 0<br>3<br>3<br>4      | 0<br>3<br>3<br>0      | 0<br>6<br>0<br>6      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>4      | 0<br>6<br>3<br>2      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>7      | 0<br>6<br>3<br>7      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>7      | 0<br>6<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>6<br>9           |                       |                       |                       |                       |                       |                       |   |
|   | ANIMAL ID   | 0<br>1<br>5<br>7<br>8                                  | 0<br>1<br>5<br>8<br>0 | 0<br>1<br>5<br>8<br>2 | 0<br>1<br>5<br>8<br>3 | 0<br>1<br>5<br>8<br>4 | 0<br>1<br>5<br>8<br>5 | 0<br>1<br>5<br>8<br>6 | 0<br>1<br>5<br>8<br>7 | 0<br>1<br>5<br>8<br>8 | 0<br>1<br>5<br>8<br>9 | 0<br>1<br>5<br>9<br>0 | 0<br>1<br>5<br>9<br>1 | 0<br>1<br>5<br>9<br>2 | 0<br>1<br>5<br>9<br>3 | 0<br>1<br>5<br>9<br>4 | 0<br>1<br>5<br>9<br>5 | 0<br>1<br>5<br>9<br>6 | 0<br>1<br>5<br>9<br>7 | 0<br>1<br>5<br>9<br>8 | 0<br>1<br>5<br>9<br>9 | 0<br>1<br>5<br>9<br>0 | 0<br>1<br>5<br>6<br>2 | 0<br>1<br>5<br>6<br>4 | 0<br>1<br>5<br>6<br>5 | 0<br>1<br>5<br>6<br>6 | 0<br>1<br>5<br>6<br>7 | 0<br>1<br>5<br>6<br>8 |   |
| Brain                                   |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |   |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Meningioma Benign                       |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Meninges, Granular Cell Tumor Benign    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Meninges, Granular Cell Tumor Malignant |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Nerve Trigeminal                        |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |   |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Peripheral Nerve, Sciatic               |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |   |
| Peripheral Nerve, Tibial                |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |   |
| Spinal Cord, Cervical                   |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |   |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Spinal Cord, Lumbar                     |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |   |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Spinal Cord, Thoracic                   |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |   |
| Leukemia Mononuclear                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Trigeminal Ganglion                     |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | I                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + |
| Lymphoma Malignant                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |

## RESPIRATORY SYSTEM

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Lung                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Alveolar/Bronchiolar Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

### Bilateral, Renal Tubule, Carcinoma

X

Urinary Bladder  
Leukemia Mononuclear  
Lymphoma Malignant

## **SYSTEMIC LESIONS**

Multiple Organ  
Leukemia Mononuclear  
Lymphoma Malignant  
Mesothelioma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

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## Cell Phone Radiation: CDMA

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**Date Report Requested:** 01/02/2018

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**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

# ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically: Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically











**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

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**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **RESPIRATORY SYSTEM**

Lung

#### **Alveolar/Bronchiolar Adenoma**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

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Lab: IIT

Bilateral, Renal Tubule, Carcinoma

## Urinary Bladder

## Leukemia Mononuclear Lymphoma Malignant

+ A + + + + +

**males**  
**(cont...)**

## **SYSTEMIC LESIONS**

## Multiple Organ

Leukemia Mononuclear  
Lymphoma Malignant  
Mesothelioma Malignant

X X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |             | 0<br>7<br>3<br>3<br>3 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>3<br>0 | 0<br>7<br>3<br>3<br>1 | 0<br>7<br>3<br>4<br>0 | 0<br>7<br>3<br>4<br>0 | 0<br>7<br>2<br>6<br>6 | 0<br>6<br>3<br>3<br>2 | 0<br>7<br>3<br>1<br>1 | 0<br>6<br>8<br>4<br>4 | 0<br>6<br>9<br>7<br>7 | 0<br>6<br>8<br>4<br>4 | 0<br>6<br>9<br>7<br>7 | 0<br>6<br>8<br>4<br>4 | 0<br>6<br>9<br>7<br>7 |
| ANIMAL ID  |             | * TOTALS              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|  | 0           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|  | 1           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|  | 6           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|  | 4           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|  | 0           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Intestine Large, Cecum    | + | + | + | + | + | + | + | + | + | + | + | + | + | A | A |   | 74 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | A | A |   | 82 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   | 80 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |   | 83 |
| Adenocarcinoma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Osteosarcoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Intestine Small, Ileum    | + | + | + | + | + | + | + | + | + | + | + | + | + | A | A |   | 77 |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |   | 75 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   | 89 |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Hepatocellular Carcinoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Leukemia Mononuclear      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Lymphoma Malignant        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| X                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 17 |
| Mesothelioma Malignant    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Oral Mucosa               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Squamous Cell Carcinoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   | * TOTALS |    |
|--|-------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|---|----------|----|
|  |             | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>4 | 0<br>0<br>0<br>0 | 0<br>1<br>6<br>4 | 0<br>1<br>6<br>4 | 0<br>1<br>6<br>4 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 |   |          |    |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr |             | ANIMAL ID        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |    |
| Pancreas   |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | A                | A | 87       |    |
| Adenoma  |             | X                | X                |                  | X                |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 19 |
| Adenoma, Multiple                                      |             |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 7  |
| Carcinoma  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 2  |
| Leukemia Mononuclear                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Salivary Glands  |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |   | 90       |    |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Parotid Gland, Adenoma                                 |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Stomach, Forestomach                                   |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |   | 89       |    |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Squamous Cell Carcinoma                                |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Stomach, Glandular                                     |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | A                | A | 85       |    |
| Leukemia Mononuclear                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| <b>CARDIOVASCULAR SYSTEM</b>                           |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          |    |
| Aorta  |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |   | 90       |    |
| Leukemia Mononuclear                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Blood Vessel   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Heart  |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |   | 90       |    |
| Leukemia Mononuclear                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |   |          | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
|  | 0<br>7                | 0<br>7           | 0<br>3           | 0<br>6           | 0<br>7           | 0<br>6           | 0<br>6           | 0<br>6           |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr | 3<br>3                | 3<br>2                | 3<br>2                | 3<br>3                | 3<br>0                | 3<br>1                | 3<br>4                | 3<br>0                | 3<br>4                | 3<br>6           | 3<br>2           | 3<br>1           | 3<br>4           | 3<br>7           | 3<br>4           | 3<br>7           |
| ANIMAL ID  | 0<br>1<br>6<br>4<br>0 | 0<br>1<br>6<br>4<br>1 | 0<br>1<br>6<br>4<br>2 | 0<br>1<br>6<br>4<br>3 | 0<br>1<br>6<br>4<br>5 | 0<br>1<br>6<br>4<br>6 | 0<br>1<br>6<br>4<br>7 | 0<br>1<br>6<br>4<br>8 | 0<br>1<br>6<br>4<br>9 | 0<br>1<br>6<br>5 |

\* TOTALS

Myocardium, Schwannoma Malignant  
 Pericardium, Schwannoma Malignant,  
 Metastatic, Thymus

3

1

## ENDOCRINE SYSTEM

Adrenal Cortex

Leukemia Mononuclear

Lymphoma Malignant

Adrenal Medulla

Pheochromocytoma Benign

Pheochromocytoma Benign, Multiple

Pheochromocytoma Malignant

Bilateral, Pheochromocytoma Benign

Islets, Pancreatic

Adenoma

Adenoma, Multiple

Carcinoma

Lymphoma Malignant

Parathyroid Gland

Adenoma

Pituitary Gland

Pars Distalis, Adenoma

Pars Distalis, Adenoma, Multiple

Thyroid Gland

+ + + + + + + + + + + + + + + + X

90

3

1

+ + + + + + + + + + + + + + + + X X

90

19

2

+ + + + + + + + + + + + + + + + A A

3

1

+ + + + + + + + + + + + + + + + X X X

87

7

1

+ + + + + + + + + + + + + + + + A A

13

1

+ + + + + M M M + + + + + + + + | +

83

2

+ + + + + + + + + + + + + + + + X X X X

90

33

1

+ + + + + + + + + + + + + + + + + + + +

86

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr | DAY ON TEST                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|--|------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |                              | 0<br>7<br>3<br>3<br>3 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>3<br>0 | 0<br>7<br>3<br>3<br>1 | 0<br>7<br>3<br>4<br>0 | 0<br>7<br>3<br>0<br>4 | 0<br>7<br>2<br>6<br>6 | 0<br>3<br>3<br>3<br>2 | 0<br>6<br>3<br>2<br>1 | 0<br>7<br>3<br>1<br>4 | 0<br>6<br>8<br>4<br>7 | 0<br>6<br>9<br>7<br>0 | 0<br>6<br>6<br>6<br>0 | 0<br>6<br>6<br>6<br>0 | 0<br>6<br>6<br>6<br>0 | 0<br>6<br>6<br>6<br>0 |
| ANIMAL ID  |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |
|  | Bilateral, C-cell, Carcinoma | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| C-cell, Adenoma  |                              | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 14                    |
| C-cell, Carcinoma                                      | X                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| <b>GENERAL BODY SYSTEM</b>                             |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Tissue NOS   |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |
| Mediastinum, Chemodectoma Benign                       |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| <b>GENITAL SYSTEM</b>                                  |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Coagulating Gland                                      |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |
| Ductus Deferens  |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Leiomyoma  |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Epididymis   | +                            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Mesothelioma Malignant                                 |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |
| Penis  |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Preputial Gland  | +                            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 89                    |
| Prostate   | +                            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Adenoma  |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Lymphoma Malignant                                     |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Seminal Vesicle  | +                            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Lymphoma Malignant                                     |                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Testis   | +                            | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr | DAY ON TEST |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |          |
|--|-------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--|----------|
|  |             | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>4 | 0<br>0<br>0<br>4 | 0<br>1<br>6<br>4 | 0<br>1<br>6<br>6 | 0<br>1<br>6<br>6 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>4 | 0<br>1<br>6<br>5 |  |          |
| ANIMAL ID  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | * TOTALS |
|  | Hemangioma  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 1        |
| Mesothelioma Malignant                                 |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 3        |
| Interstitial Cell, Adenoma                             |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 1        |

## HEMATOPOIETIC SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|----|
| Bone Marrow  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |    |
| Leukemia Mononuclear                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  | 4  |
| Lymphoma Malignant   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Pheochromocytoma Malignant, Metastatic,<br>Adrenal Medulla |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Lymph Node   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 24 |
| Mediastinal, Leukemia Mononuclear                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Mediastinal, Lymphoma Malignant                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Lymph Node, Mandibular                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |    |
| Leukemia Mononuclear                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2  |
| Lymphoma Malignant   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Lymph Node, Mesenteric                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 88 |    |
| Leukemia Mononuclear                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2  |
| Lymphoma Malignant   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Spleen   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |    |
| Leukemia Mononuclear                                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 4  |
| Lymphoma Malignant   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |
| Thymus   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 87 |    |
| Lymphoma Malignant   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|  |                       | 0<br>7<br>3<br>3<br>3 | 0<br>7<br>3<br>2<br>2 | 0<br>7<br>3<br>3<br>0 | 0<br>7<br>3<br>3<br>1 | 0<br>7<br>3<br>4<br>0 | 0<br>7<br>3<br>3<br>4 | 0<br>7<br>3<br>6<br>6 | 0<br>7<br>3<br>2<br>3 | 0<br>6<br>8<br>4<br>4 | 0<br>6<br>9<br>7<br>7 | 0<br>6<br>8<br>4<br>7 | 0<br>6<br>9<br>7<br>7 | 0<br>6<br>8<br>4<br>7 | 0<br>6<br>9<br>7<br>7 |          |
| ANIMAL ID  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |
|  | 0<br>1<br>6<br>4<br>0 | 1<br>1<br>6<br>4<br>1 | 0<br>1<br>6<br>4<br>5 | 0<br>1<br>6<br>4<br>6 | 0<br>1<br>6<br>4<br>6 | 0<br>1<br>6<br>4<br>6 | 0<br>1<br>6<br>4<br>6 | 0<br>1<br>6<br>4<br>6 | 0<br>1<br>6<br>4<br>6 | 0<br>1<br>6<br>5<br>5 | 0<br>1<br>6<br>5<br>5 | 0<br>1<br>6<br>5<br>5 | 0<br>1<br>6<br>5<br>5 | 0<br>1<br>6<br>5<br>5 | 0<br>1<br>6<br>5<br>5 | 1        |
| Schwannoma Malignant                                   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |

## INTEGUMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 80 |
| Fibroadenoma                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Skin                                       | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Keratoacanthoma                            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 5  |
| Squamous Cell Carcinoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Squamous Cell Papilloma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Conjunctiva, Sarcoma                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Subcutaneous Tissue, Fibroma               |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   | 6  |
| Subcutaneous Tissue, Fibroma, Multiple     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Subcutaneous Tissue, Fibrosarcoma          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Subcutaneous Tissue, Hibernoma             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Subcutaneous Tissue, Lipoma                |   |   |   |   |   |   |   |   |   | X | X |   |   |   |   | 4  |
| Subcutaneous Tissue, Lymphoma Malignant    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Subcutaneous Tissue, Myxosarcoma, Multiple |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | 1  |

## MUSCULOSKELETAL SYSTEM

|                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Bone, Vertebra  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Skeletal Muscle | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Hemangiosarcoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## NERVOUS SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | * TOTALS |
|--|-------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----|----------|
|  |             | 0<br>7<br>3<br>3 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>2 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>4 | 0<br>0<br>0<br>0 | 0<br>1<br>6<br>4 | 0<br>1<br>6<br>4 | 0<br>1<br>6<br>4 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 | 0<br>1<br>6<br>5 |    |          |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>3.0W/kg(CDMA)chr |             | ANIMAL ID        |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |          |
| Brain  |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90 |          |
| Leukemia Mononuclear                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X  | 4        |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1        |
| Meningioma Benign                                      |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1        |
| Meninges, Granular Cell Tumor Benign                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1        |
| Meninges, Granular Cell Tumor Malignant                |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1        |
| Nerve Trigeminal                                       |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | +                | +                | +                | 88 |          |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1        |
| Peripheral Nerve, Sciatic                              |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |                  |                  |                  |    | 90       |
| Peripheral Nerve, Tibial                               |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |                  |                  |                  |    | 90       |
| Spinal Cord, Cervical                                  |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |    | 90       |
| Leukemia Mononuclear                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 3        |
| Spinal Cord, Lumbar                                    |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |                  |                  |                  |    | 90       |
| Leukemia Mononuclear                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 3        |
| Spinal Cord, Thoracic                                  |             | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                |                  |    | 90       |
| Leukemia Mononuclear                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 3        |
| Trigeminal Ganglion                                    |             | M                | M                | +                | +                | +                | +                | +                | +                | +                | +                | +                | M                | M                | +                |                  |    | 79       |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | 1        |

## RESPIRATORY SYSTEM

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Alveolar/Bronchiolar Adenoma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST                   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | * TOTALS |  |
|--|-------------------------------|-----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--|
|  |                               | 0<br>7    | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>3 | 0<br>6 | 0<br>7 | 0<br>6 | 0<br>6 | 0<br>6 | 0<br>6 |        |          |  |
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE</b>                 | <b>3.0W/kg(CDMA)chr</b>       |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |  |
|  |                               | ANIMAL ID | 0<br>1 |          |  |
| Alveolar/Bronchiolar Carcinoma                             |                               | X         |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Carcinoma, Metastatic, Thyroid Gland                       |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Leukemia Mononuclear                                       |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        |  |
| Lymphoma Malignant   |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Pheochromocytoma Malignant, Metastatic,<br>Adrenal Medulla |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        |  |
| Schwannoma Malignant, Metastatic, Thymus                   |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Nose   | + + + + + + + + + + + + + + + |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 90       |  |
| Lymphoma Malignant   |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Trachea  | + + + + + + + + + + + + + + + |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 88       |  |
| <b>SPECIAL SENSES SYSTEM</b>                               |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |  |
| Eye  | + + + + + + + + + + + + A A   |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 81       |  |
| Harderian Gland  | + + + + + + + + + + + + + + + |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 90       |  |
| Lacrimal Gland   |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Zymbal's Gland<br>Adenoma                                  |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
|  |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| <b>URINARY SYSTEM</b>                                      |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |  |
| Kidney   | + + + + + + + + + + + + + + + |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 90       |  |
| Lipoma   |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Liposarcoma  |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Lymphoma Malignant   |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Bilateral, Renal Tubule, Adenoma                           |                               |           |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **SYSTEMIC LESIONS**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

**Test Type:** CHRONIC

#### **Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

#### P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | males<br>(cont...) |
|--|-------------|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------------------|
|  |             | 0<br>7<br>3<br>4                                       | 0<br>7<br>3<br>4      | 0<br>5<br>2<br>8      | 0<br>5<br>8<br>0      | 0<br>7<br>3<br>0      | 0<br>6<br>6<br>5      | 0<br>7<br>3<br>2      | 0<br>5<br>5<br>4      | 0<br>4<br>6<br>9      | 0<br>5<br>4<br>5      | 0<br>6<br>0<br>8      | 0<br>7<br>1<br>3      | 0<br>6<br>9<br>3      | 0<br>4<br>9<br>7      | 0<br>7<br>3<br>3      | 0<br>5<br>3<br>1      | 0<br>5<br>6<br>7      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      |                       |                    |
|  | ANIMAL ID   | 0<br>1<br>7<br>6<br>1                                  | 0<br>1<br>1<br>7<br>2 | 0<br>1<br>1<br>7<br>3 | 0<br>1<br>1<br>7<br>4 | 0<br>1<br>1<br>7<br>5 | 0<br>1<br>1<br>7<br>6 | 0<br>1<br>1<br>7<br>7 | 0<br>1<br>1<br>7<br>8 | 0<br>1<br>1<br>7<br>9 | 0<br>1<br>1<br>7<br>0 | 0<br>1<br>1<br>7<br>1 | 0<br>1<br>1<br>7<br>2 | 0<br>1<br>1<br>7<br>3 | 0<br>1<br>1<br>7<br>4 | 0<br>1<br>1<br>7<br>5 | 0<br>1<br>1<br>7<br>6 | 0<br>1<br>1<br>7<br>7 | 0<br>1<br>1<br>7<br>8 | 0<br>1<br>1<br>7<br>9 | 0<br>1<br>1<br>7<br>0 | 0<br>1<br>1<br>7<br>1 | 0<br>1<br>1<br>7<br>2 | 0<br>1<br>1<br>7<br>3 | 0<br>1<br>1<br>7<br>4 |                    |
| Lymphoma Malignant                           |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                    |
| Pheochromocytoma Benign                      |             | X  |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | X                     |                       |                       |                       |                       |                    |
| Pheochromocytoma Malignant                   |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Bilateral, Pheochromocytoma Benign           |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Islets, Pancreatic                           |             | +  | +                     | A                     | A                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |
| Adenoma                                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Carcinoma                                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Carcinoma, Multiple                          |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Parathyroid Gland                            |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |
| Adenoma                                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Pituitary Gland                              |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                    |
| Lymphoma Malignant                           |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Schwannoma Malignant, Metastatic, Tissue Nos |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Pars Distalis, Adenoma                       |             |  |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | X                     |                       |                       |                       |                       |                    |
| Pars Distalis, Adenoma, Multiple             |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Thyroid Gland                                |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                  |
| C-cell, Adenoma                              |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       | X                     |                       |                       |                       |                       |                    |
| C-cell, Carcinoma                            |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |
| Follicular Cell, Adenoma                     |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                    |

## GENERAL BODY SYSTEM

Tissue NOS

Schwannoma Malignant

Fat, Schwannoma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically







**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|
|  |             | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>4      | 0<br>5<br>2<br>8      | 0<br>5<br>8<br>0      | 0<br>7<br>3<br>0      | 0<br>6<br>6<br>5      | 0<br>7<br>3<br>2      | 0<br>4<br>6<br>9      | 0<br>5<br>4<br>5      | 0<br>6<br>0<br>8      | 0<br>7<br>1<br>3      | 0<br>6<br>9<br>3      | 0<br>4<br>9<br>7      | 0<br>7<br>3<br>3      | 0<br>5<br>3<br>1      | 0<br>5<br>6<br>7      | 0<br>5<br>3<br>7      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>4      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>3      | 0<br>7<br>3<br>3      |                       |   |
| ANIMAL ID  |             | 0<br>1<br>7<br>6<br>1 | 0<br>1<br>1<br>6<br>2 | 0<br>1<br>1<br>6<br>3 | 0<br>1<br>1<br>6<br>4 | 0<br>1<br>1<br>6<br>5 | 0<br>1<br>1<br>6<br>6 | 0<br>1<br>1<br>6<br>7 | 0<br>1<br>1<br>6<br>8 | 0<br>1<br>1<br>6<br>9 | 0<br>1<br>1<br>7<br>0 | 0<br>1<br>1<br>7<br>1 | 0<br>1<br>1<br>7<br>2 | 0<br>1<br>1<br>7<br>3 | 0<br>1<br>1<br>7<br>4 | 0<br>1<br>1<br>7<br>5 | 0<br>1<br>1<br>7<br>6 | 0<br>1<br>1<br>7<br>7 | 0<br>1<br>1<br>7<br>8 | 0<br>1<br>1<br>7<br>9 | 0<br>1<br>1<br>7<br>0 | 0<br>1<br>1<br>7<br>1 | 0<br>1<br>1<br>7<br>2 | 0<br>1<br>1<br>7<br>3 | 0<br>1<br>1<br>7<br>4 |   |
|  |             | males<br>(cont...)    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Harderian Gland  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |   |
| Lymphoma Malignant                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Schwannoma Malignant, Metastatic, Tissue<br>Nos        |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |
| Lacrimal Gland   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | + |
| Zymbal's Gland   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | + |
| Adenoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X |

## URINARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Kidney  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Lymphoma Malignant  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Nephroblastoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pelvis, Urothelium, Carcinoma                             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Perirenal Tissue, Sarcoma, Metastatic, Skeletal<br>Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Renal Tubule, Carcinoma                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Urinary Bladder   | + | + | + | A | A | + | + | A | + | + | + | + | + | + | + | + | A | A | + | + | + | + | + | + | + |   |
| Serosa, Sarcoma, Metastatic, Skeletal Muscle              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |

## SYSTEMIC LESIONS

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Histiocytic Sarcoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Leukemia Mononuclear   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

# ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr | DAY ON TEST<br>ANIMAL ID | males<br>(cont...) |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|--------------------------|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |                          | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |
|  |                          | 6                  | 7 | 7 | 5 | 5 | 2 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 4 | 6 | 6 |
|  |                          | 6                  | 3 | 3 | 8 | 0 | 0 | 3 | 3 | 3 | 3 | 3 | 1 | 2 | 3 | 1 | 7 | 3 | 3 | 4 | 3 | 2 | 3 | 4 | 0 | 6 |
|  |                          | 5                  | 2 | 2 | 2 | 0 | 1 | 2 | 1 | 3 | 2 | 0 | 1 | 7 | 2 | 3 | 1 | 7 | 3 | 4 | 3 | 2 | 0 | 8 | 5 | 1 |
|  |                          | 0                  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |                          | 1                  | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|  |                          | 7                  | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
|  |                          | 8                  | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 |
|  |                          | 6                  | 7 | 8 | 9 | 0 | 1 | 3 | 4 | 5 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 6 | 7 | 8 | 9 | 2 | 3 | 4 | 5 |

Adenoma

X

Adenoma, Multiple  
Lymphoma MalignantSalivary Glands  
Lymphoma MalignantStomach, Forestomach  
Lymphoma MalignantStomach, Glandular  
Lymphoma Malignant

+ A +

+ +

+ + + + + + A + + + + + + + + + + + + + + + + + + A +

## CARDIOVASCULAR SYSTEM

Aorta  
Sarcoma, Metastatic, Skeletal Muscle

+ +

Heart  
Lymphoma Malignant  
Atrium, Schwannoma Malignant  
Endocardium, Schwannoma Malignant  
Myocardium, Schwannoma Malignant

+ +

X

## ENDOCRINE SYSTEM

Adrenal Cortex  
Carcinoma  
Lymphoma Malignant

+ X

Adrenal Medulla

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **GENERAL BODY SYSTEM**

## Tissue NOS

#### Schwannoma Malignant

## Fat, Schwannoma Malignant

1

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|   | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| HARLAN SPRAGUE DAWLEY RATS<br>MALE  | 6 | 7 | 5 | 5 | 2 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 4 | 6 | 6 | 5 |
| 6.0W/kg(CDMA)chr  | 6 | 3 | 3 | 8 | 0 | 0 | 3 | 3 | 3 | 3 | 3 | 1 | 2 | 3 | 1 | 7 | 2 | 3 | 1 | 3 | 3 | 4 | 0 | 5 |
| ANIMAL ID   | 5 | 2 | 2 | 2 | 0 | 1 | 2 | 1 | 3 | 2 | 0 | 1 | 7 | 2 | 9 | 2 | 7 | 3 | 3 | 4 | 3 | 2 | 0 | 0 |
| Lumbar, Sarcoma, Metastatic, Skeletal Muscle  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Mediastinal, Leukemia Mononuclear   | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Mediastinal, Lymphoma Malignant   | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
| Pancreatic, Lymphoma Malignant  | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 |
| Renal, Leukemia Mononuclear   | 6 | 7 | 8 | 9 | 0 | 1 | 3 | 4 | 5 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 6 | 7 | 8 | 9 | 2 | 3 | 4 |
| Lymph Node, Mandibular<br>Lymphoma Malignant  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |   |
| Lymph Node, Mesenteric<br>Lymphoma Malignant  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Sarcoma, Metastatic, Skeletal Muscle  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Spleen<br>Leukemia Mononuclear<br>Lymphoma Malignant  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + |   |
| X   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Thymus<br>Histiocytic Sarcoma<br>Lymphoma Malignant<br>Sarcoma, Metastatic, Skeletal Muscle | + | + | + | + | + | + | + | + | M | + | + | + | + | I | + | M | + | + | + | + | + | + | + | + |

## INTEGUMENTARY SYSTEM

Mammary Gland  
Fibroadenoma

+ + + M + + + + + + + + + + + + + + + M + M +

X

Skin  
Keratoacanthoma  
Sarcoma, Metastatic, Skeletal Muscle

+ +

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically





Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  |   |
| ANIMAL ID  | 6           | 7 | 7 | 5 | 5 | 2 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 3 | 4 | 0                  | 5 |
|  | 6           | 3 | 3 | 8 | 0 | 0 | 3 | 3 | 3 | 3 | 3 | 3 | 1 | 2 | 3 | 1 | 7 | 2 | 3 | 1 | 7 | 3 | 3 | 4 | 2 | 0                  | 1 |
|  | 5           | 2 | 2 | 2 | 0 | 1 | 2 | 1 | 3 | 2 | 0 | 1 | 7 | 2 | 9 | 2 | 7 | 3 | 3 | 4 | 2 | 3 | 2 | 0 | 8 | 5                  | 0 |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  | 0 |
|  | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1                  | 1 |
|  | 7           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8                  | 8 |
|  | 8           | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1                  | 1 |
|  | 6           | 7 | 8 | 9 | 0 | 1 | 3 | 4 | 5 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 6 | 7 | 8 | 9 | 2 | 3 | 4 | 5 | males<br>(cont...) |   |

Harderian Gland

+ A +

Lymphoma Malignant

Schwannoma Malignant, Metastatic, Tissue  
Nos

Lacrimal Gland

Zymbal's Gland

Adenoma

## URINARY SYSTEM

Kidney

+ A +

Lymphoma Malignant

Nephroblastoma

Pelvis, Urothelium, Carcinoma

Perirenal Tissue, Sarcoma, Metastatic, Skeletal  
Muscle

Renal Tubule, Carcinoma

Urinary Bladder

+ + + + + A + + + + + + + + + + + + + + + + + + + A A

Serosa, Sarcoma, Metastatic, Skeletal Muscle

## SYSTEMIC LESIONS

Multiple Organ

+ +

Histiocytic Sarcoma

Leukemia Mononuclear

Lymphoma Malignant

Mesothelioma Malignant

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X, Lesion present

I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

LANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | males<br>(cont...)    |                       |                       |                       |                       |
|--|-------------|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |             | 0<br>7<br>3<br>1                                       | 0<br>3<br>7<br>1      | 0<br>5<br>6<br>1      | 0<br>4<br>8<br>7      | 0<br>7<br>3<br>0      | 0<br>2<br>9<br>0      | 0<br>5<br>7<br>9      | 0<br>4<br>5<br>2      | 0<br>6<br>7<br>3      | 0<br>6<br>8<br>3      | 0<br>4<br>3<br>1      | 0<br>6<br>2<br>8      | 0<br>3<br>4<br>1      | 0<br>7<br>3<br>0      | 0<br>5<br>9<br>3      | 0<br>7<br>3<br>4      | 0<br>1<br>5<br>3      | 0<br>7<br>3<br>0      | 0<br>1<br>5<br>3      | 0<br>0<br>0<br>0      |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|  | ANIMAL ID   | 0<br>1<br>8<br>1<br>6                                  | 0<br>1<br>8<br>1<br>7 | 0<br>1<br>8<br>2<br>0 | 0<br>1<br>8<br>2<br>1 | 0<br>1<br>8<br>2<br>2 | 0<br>1<br>8<br>2<br>5 | 0<br>1<br>8<br>2<br>6 | 0<br>1<br>8<br>2<br>7 | 0<br>1<br>8<br>2<br>8 | 0<br>1<br>8<br>2<br>9 | 0<br>1<br>8<br>3<br>0 | 0<br>1<br>8<br>3<br>1 | 0<br>1<br>8<br>3<br>2 | 0<br>1<br>8<br>3<br>3 | 0<br>1<br>8<br>3<br>4 | 0<br>1<br>8<br>3<br>5 | 0<br>1<br>8<br>3<br>6 | 0<br>1<br>8<br>3<br>7 | 0<br>1<br>8<br>3<br>8 | 0<br>1<br>8<br>3<br>9 | 0<br>1<br>8<br>4<br>0 | 0<br>1<br>8<br>4<br>1 | 0<br>1<br>8<br>4<br>2 | 0<br>1<br>8<br>4<br>3 | 0<br>1<br>8<br>4<br>4 | 0<br>1<br>8<br>4<br>5 | 0<br>1<br>8<br>4<br>6 | 0<br>1<br>8<br>4<br>7 | 0<br>1<br>8<br>4<br>8 |
| Lymphoma Malignant                           |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Pheochromocytoma Benign                      |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Pheochromocytoma Malignant                   |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Bilateral, Pheochromocytoma Benign           |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Islets, Pancreatic                           |             | +  | +                     | +                     | A                     | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     |                       |                       |                       |
| Adenoma                                      |             |  |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Carcinoma                                    |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Carcinoma, Multiple                          |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Parathyroid Gland                            |             | +  | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       |                       |                       |                       |
| Adenoma                                      |             |  |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Pituitary Gland                              |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       |                       |                       |                       |
| Lymphoma Malignant                           |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Schwannoma Malignant, Metastatic, Tissue Nos |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Pars Distalis, Adenoma                       |             |  |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Pars Distalis, Adenoma, Multiple             |             |  |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Thyroid Gland                                |             | +  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |                       |                       |                       |                       |
| C-cell, Adenoma                              |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| C-cell, Carcinoma                            |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |
| Follicular Cell, Adenoma                     |             |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |

## GENERAL BODY SYSTEM

|                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |     |
|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|-----|
| Tissue NOS                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | + + |
| Schwannoma Malignant      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | X   |
| Fat, Schwannoma Malignant |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | X   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

Time Report Requested: 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **GENITAL SYSTEM**

## Epididymis Mesothelioma Malignant

## Penis

## Preputial Gland Sarcoma, Metastatic, Skeletal Muscle

Prostate  
Adenoma  
Sarcoma, Metastatic, Skeletal Muscle

Seminal Vesicle  
Sarcoma, Metastatic, Skeletal Muscle

Testis  
Mesothelioma Malignant  
Interstitial Cell, Adenoma

## **HEMATOPOIETIC SYSTEM**

Bone Marrow  
Lymphoma Malignant  
Sarcoma, Metastatic, Skeletal Muscle

Lymph Node  
Iliac, Lymphoma Malignant  
Iliac, Sarcoma, Metastatic, Skeletal Muscle

+ +

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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Lab: IIT

|  | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | males<br>(cont...) |   |
|--|-------------|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--------------------|---|
|  |             | 0  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                  |   |
|  | ANIMAL ID   | 7  | 3 | 5 | 4 | 7 | 2 | 5 | 4 | 7 | 6 | 5 | 5 | 6 | 7 | 6 | 4 | 6 | 3 | 7 | 5 | 7 | 1 | 0 | 7 | 3                  | 0 |
|  |             | 1  | 1 | 7 | 8 | 0 | 0 | 9 | 2 | 5 | 2 | 0 | 7 | 4 | 2 | 3 | 0 | 3 | 1 | 8 | 1 | 0 | 3 | 4 | 3 | 0                  |   |
|  |             | 6  | 7 | 0 | 1 | 2 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 3 | 4 | 5 | 7 | 8                  |   |
| Lumbar, Sarcoma, Metastatic, Skeletal Muscle |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Mediastinal, Leukemia Mononuclear            |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Mediastinal, Lymphoma Malignant              |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Pancreatic, Lymphoma Malignant               |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Renal, Leukemia Mononuclear                  |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Lymph Node, Mandibular Lymphoma Malignant    |             | +  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | +                  |   |
| Lymph Node, Mesenteric Lymphoma Malignant    |             | +  | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | A | + | + | + | + | + | + | +                  |   |
| Sarcoma, Metastatic, Skeletal Muscle         |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Spleen                                       |             | +  | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | +                  |   |
| Leukemia Mononuclear                         |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Lymphoma Malignant                           |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Thymus                                       |             | +  | + | M | + | + | + | + | + | + | I | + | M | + | + | + | + | + | + | + | + | + | + | + | + | +                  |   |
| Histiocytic Sarcoma                          |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Lymphoma Malignant                           |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |
| Sarcoma, Metastatic, Skeletal Muscle         |             |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                    |   |

## INTEGUMENTARY SYSTEM

Mammary Gland  
Fibroadenoma

+ + + + + + + M + + + M + + + + + + + + + + + + + + + + M +

Skin  
Keratoacanthoma  
Sarcoma, Metastatic, Skeletal Muscle

+ +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST             | males<br>(cont...) |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
|--|-------------------------|--------------------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|---|---|--|
|  |                         | 07                 | 03 | 05 | 04 | 07 | 02 | 05 | 04 | 07 | 06 | 05 | 05 | 06 | 07 | 06 | 04 | 06 | 03 | 07 | 05 | 07 | 01 | 07 |   |   |  |
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>MALE</b>   | <b>6.0W/kg(CDMA)chr</b> | ANIMAL ID          | 1  | 1  | 7  | 8  | 0  | 0  | 9  | 2  | 5  | 2  | 0  | 7  | 2  | 3  | 0  | 3  | 1  | 8  | 1  | 9  | 0  | 3  | 4 | 3 |  |
| Spinal Cord, Cervical Lymphoma Malignant     |                         |                    | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + |  |
| Spinal Cord, Lumbar Lymphoma Malignant       |                         |                    | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + |  |
| Spinal Cord, Thoracic Lymphoma Malignant     |                         |                    | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + |  |
| Trigeminal Ganglion                          |                         |                    | +  | +  | +  | M  | +  | M  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + |  |
| <b>RESPIRATORY SYSTEM</b>                    |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
| Lung   |                         |                    | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | + | + |  |
| Carcinoma, Metastatic, Kidney                |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
| Hepatocellular Carcinoma, Metastatic, Liver  |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
| Lymphoma Malignant                           |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
| Sarcoma, Metastatic, Skeletal Muscle         |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
| Nose   |                         |                    | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | A  | +  | +  | +  | + | + |  |
| Lymphoma Malignant                           |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
| Schwannoma Malignant, Metastatic, Tissue Nos |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
| Trachea                                      |                         |                    | +  | +  | A  | A  | +  | +  | +  | A  | +  | +  | A  | +  | +  | +  | A  | +  | +  | +  | +  | +  | +  | +  | + |   |  |
| <b>SPECIAL SENSES SYSTEM</b>                 |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |
| Eye  |                         |                    | +  | +  | +  | A  | +  | +  | +  | M  | A  | +  | +  | +  | +  | +  | A  | A  | +  | A  | +  | +  | +  | +  | + |   |  |
| Lymphoma Malignant                           |                         |                    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr | DAY ON TEST | ANIMAL ID |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |
|--|-------------|-----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|--|
|  |             |           | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>4      | 0<br>6<br>0<br>7      | 0<br>5<br>9<br>8      | 0<br>6<br>3<br>4      | 0<br>7<br>3<br>0      | 0<br>7<br>2<br>0      | 0<br>5<br>8<br>6      | 0<br>7<br>3<br>7      | 0<br>7<br>0<br>8      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>7      | 0<br>4<br>2<br>5      | 0<br>7<br>2<br>5      | 0<br>7<br>3<br>0      |  |  |
|  |             |           | 0<br>1<br>8<br>4<br>9 | 0<br>1<br>8<br>5<br>1 | 0<br>1<br>8<br>5<br>2 | 0<br>1<br>8<br>5<br>3 | 0<br>1<br>8<br>5<br>4 | 0<br>1<br>8<br>5<br>5 | 0<br>1<br>8<br>5<br>6 | 0<br>1<br>8<br>5<br>7 | 0<br>1<br>8<br>5<br>8 | 0<br>1<br>8<br>6<br>0 | 0<br>1<br>8<br>6<br>1 | 0<br>1<br>8<br>6<br>2 | 0<br>1<br>8<br>6<br>3 | 0<br>1<br>8<br>6<br>4 | 0<br>1<br>8<br>6<br>5 |  |  |

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |          |
|--|-------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--|----------|
|  |             | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>4 | 0<br>7<br>0<br>7 | 0<br>6<br>3<br>0 | 0<br>7<br>2<br>1 | 0<br>7<br>2<br>0 | 0<br>5<br>8<br>6 | 0<br>7<br>3<br>7 | 0<br>7<br>3<br>8 | 0<br>7<br>3<br>1 | 0<br>7<br>3<br>7 | 0<br>4<br>2<br>5 | 0<br>7<br>3<br>0 |  |          |
| ANIMAL ID  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | * TOTALS |
|  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |          |
| Adenoma  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 5        |
| Adenoma, Multiple                                      |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 2        |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 2        |
| Salivary Glands  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 86       |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 1        |
| Stomach, Forestomach                                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 90       |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 2        |
| Stomach, Glandular                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 78       |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  | A                |                  |                  |                  |                  | A                |                  |                  |                  |  | 2        |
| <b>CARDIOVASCULAR SYSTEM</b>                           |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |          |
| Aorta  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 90       |
| Sarcoma, Metastatic, Skeletal Muscle                   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 1        |
| Heart  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 90       |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 3        |
| Atrium, Schwannoma Malignant                           |             |                  |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |                  |  | 1        |
| Endocardium, Schwannoma Malignant                      |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 4        |
| Myocardium, Schwannoma Malignant                       |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 1        |
| <b>ENDOCRINE SYSTEM</b>                                |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |          |
| Adrenal Cortex   |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 89       |
| Carcinoma  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 2        |
| Lymphoma Malignant                                     |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 2        |
| Adrenal Medulla  |             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | 90       |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |             | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>4      | 0<br>6<br>0<br>7      | 0<br>5<br>3<br>0      | 0<br>6<br>3<br>1      | 0<br>5<br>8<br>6      | 0<br>7<br>3<br>7      | 0<br>7<br>0<br>8      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>7      | 0<br>4<br>2<br>5      | 0<br>7<br>3<br>0      |                       |                       |                       |
| ANIMAL ID  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |
|  |             | 0<br>1<br>8<br>4<br>9 | 0<br>1<br>8<br>5<br>1 | 0<br>1<br>8<br>5<br>2 | 0<br>1<br>8<br>5<br>3 | 0<br>1<br>8<br>5<br>4 | 0<br>1<br>8<br>5<br>5 | 0<br>1<br>8<br>5<br>6 | 0<br>1<br>8<br>5<br>7 | 0<br>1<br>8<br>5<br>8 | 0<br>1<br>8<br>6<br>0 | 0<br>1<br>8<br>6<br>1 | 0<br>1<br>8<br>6<br>2 | 0<br>1<br>8<br>6<br>3 | 0<br>1<br>8<br>6<br>4 | 0<br>1<br>8<br>6<br>5 |
| Lymphoma Malignant                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Pheochromocytoma Benign                                |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 12                    |
| Pheochromocytoma Malignant                             |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Bilateral, Pheochromocytoma Benign                     |             | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Islets, Pancreatic                                     |             | +                     | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 79                    |
| Adenoma  |             | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 7                     |
| Carcinoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 5                     |
| Carcinoma, Multiple                                    |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Parathyroid Gland                                      |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | 82                    |
| Adenoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Pituitary Gland  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Lymphoma Malignant                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Schwannoma Malignant, Metastatic, Tissue<br>Nos        |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Pars Distalis, Adenoma                                 |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 11                    |
| Pars Distalis, Adenoma, Multiple                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Thyroid Gland  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 85                    |
| C-cell, Adenoma  |             |                       |                       |                       |                       |                       | X                     | X                     |                       |                       |                       |                       |                       |                       |                       | 11                    |
| C-cell, Carcinoma                                      |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4                     |
| Follicular Cell, Adenoma                               |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |

## GENERAL BODY SYSTEM

|                           |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |   |
|---------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|---|
| Tissue NOS                |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 3 |
| Schwannoma Malignant      |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |
| Fat, Schwannoma Malignant |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | 1 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
|  |             | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>4      | 0<br>7<br>0<br>7      | 0<br>6<br>3<br>0      | 0<br>5<br>3<br>4      | 0<br>6<br>2<br>0      | 0<br>7<br>2<br>0      | 0<br>5<br>3<br>6      | 0<br>7<br>3<br>7      | 0<br>7<br>0<br>8      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>7      | 0<br>4<br>2<br>5      | 0<br>7<br>3<br>0      |  |
| ANIMAL ID  |             | 0<br>1<br>8<br>4<br>9 | 0<br>1<br>8<br>5<br>1 | 0<br>1<br>8<br>5<br>2 | 0<br>1<br>8<br>5<br>3 | 0<br>1<br>8<br>5<br>4 | 0<br>1<br>8<br>5<br>5 | 0<br>1<br>8<br>5<br>6 | 0<br>1<br>8<br>5<br>7 | 0<br>1<br>8<br>5<br>8 | 0<br>1<br>8<br>6<br>0 | 0<br>1<br>8<br>6<br>1 | 0<br>1<br>8<br>6<br>2 | 0<br>1<br>8<br>6<br>3 | 0<br>1<br>8<br>6<br>4 |  |
|  | *           | * TOTALS              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |

## GENITAL SYSTEM

|                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Epididymis                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Mesothelioma Malignant               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Penis                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Preputial Gland                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 89 |
| Sarcoma, Metastatic, Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Prostate                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 85 |
| Adenoma                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Sarcoma, Metastatic, Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Seminal Vesicle                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Sarcoma, Metastatic, Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Testis                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Mesothelioma Malignant               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Interstitial Cell, Adenoma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## HEMATOPOIETIC SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow                                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymphoma Malignant                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Sarcoma, Metastatic, Skeletal Muscle        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 16 |
| Iliac, Lymphoma Malignant                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Iliac, Sarcoma, Metastatic, Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **INTEGUMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X., Lesion present

BLANK .. Not examined microscopically

#### I .. Insufficient tissue

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDM

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## MUSCULOSKELETAL SYSTEM

## **NERVOUS SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

M .. Missing tissue

± .. Tissue examined microscopically

#### A. Autolysis precludes evaluation

X - Lesion present

BLANK - Not examined microscopically

| Insufficient tissue

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

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Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>MALE<br>6.0W/kg(CDMA)chr | ANIMAL ID | DAY ON TEST | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|--|-----------|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |           | 7           | 7 | 7 | 6 | 5 | 6 | 7 | 7 | 5 | 7 | 7 | 7 | 7 | 4 | 7 |
|  |           | 3           | 3 | 3 | 0 | 9 | 3 | 3 | 2 | 8 | 3 | 0 | 3 | 3 | 2 | 3 |
|  |           | 1           | 4 | 7 | 8 | 4 | 0 | 1 | 0 | 6 | 7 | 8 | 1 | 7 | 5 | 0 |
|  |           | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  |           | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|  |           | 8           | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 |
|  |           | 4           | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 |
|  |           | 9           | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 0 | 1 | 2 | 3 | 4 | 5 |
|  |           | * TOTALS    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Harderian Gland                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 89 |
| Lymphoma Malignant                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Schwannoma Malignant, Metastatic, Tissue Nos |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lacrimal Gland                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Zymbal's Gland                               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Adenoma                                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## URINARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 87 |
| Lymphoma Malignant                                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Nephroblastoma   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pelvis, Urothelium, Carcinoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Perirenal Tissue, Sarcoma, Metastatic, Skeletal Muscle |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Renal Tubule, Carcinoma                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Urinary Bladder  | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | 78 |
| Serosa, Sarcoma, Metastatic, Skeletal Muscle           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## SYSTEMIC LESIONS

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Multiple Organ         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Histiocytic Sarcoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Leukemia Mononuclear   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Mesothelioma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type:** CHRONIC

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

**Lab:** IIT

\*\*\* END OF MALE DATA \*\*\*

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

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**Experiment Number:** 20105 - 56

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## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

#### I .. Insufficient tissue

DE 47-111 Not examined microscopically



**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

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Lab: IIT

## **GENERAL BODY SYSTEM**

## Tissue NOS

Abdominal, Schwannoma Malignant  
Abdominal, Fat, Lymphoma Malignant

## **GENITAL SYSTEM**

### **Clitoral Gland**

Ovary

## Cystadenoma

#### **Cystadenoma Granulosa Cell Tumor Benign**

#### **Granulosa Cell Tumor Malignant**

### Lymphoma Malignant

For more information about the study, please contact Dr. John D. Cawley at (609) 258-4626 or via email at [jdcawley@princeton.edu](mailto:jdcawley@princeton.edu).

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

## I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

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## **INTEGUMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumo

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically





**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

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## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

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BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **GENERAL BODY SYSTEM**

|                                    |   |   |   |
|------------------------------------|---|---|---|
| Tissue NOS                         | + | + | + |
| Abdominal, Schwannoma Malignant    |   |   |   |
| Abdominal, Fat, Lymphoma Malignant |   | X |   |

## **GENITAL SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr                          | DAY ON TEST                              |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|---|--|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
|   |  | 0<br>7<br>3<br>7                | 0<br>7<br>3<br>8                | 0<br>4<br>8<br>9                | 0<br>7<br>4<br>1                | 0<br>6<br>1<br>4                | 0<br>4<br>6<br>4                | 0<br>7<br>1<br>4                | 0<br>7<br>9<br>1                | 0<br>6<br>1<br>1                | 0<br>7<br>4<br>1                | 0<br>5<br>1<br>0                | 0<br>6<br>0<br>0                | 0<br>7<br>5<br>0                | 0<br>7<br>4<br>5                | 0<br>7<br>3<br>1                | 0<br>5<br>1<br>0                | 0<br>7<br>4<br>0                | 0<br>7<br>4<br>4                | 0<br>2<br>0<br>2                | 0<br>7<br>3<br>9                |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ANIMAL ID   |  | 0<br>0<br>0<br>0<br>6<br>3<br>5 | 0<br>0<br>0<br>0<br>6<br>3<br>6 | 0<br>0<br>0<br>0<br>6<br>3<br>4 | 0<br>0<br>0<br>0<br>6<br>4<br>4 | 0<br>0<br>0<br>0<br>6<br>4<br>5 | 0<br>0<br>0<br>0<br>6<br>6<br>6 | 0<br>0<br>0<br>0<br>6<br>8<br>8 | 0<br>0<br>0<br>0<br>6<br>9<br>9 | 0<br>0<br>0<br>0<br>6<br>1<br>1 | 0<br>0<br>0<br>0<br>6<br>2<br>2 | 0<br>0<br>0<br>0<br>6<br>3<br>3 | 0<br>0<br>0<br>0<br>6<br>4<br>4 | 0<br>0<br>0<br>0<br>6<br>5<br>5 | 0<br>0<br>0<br>0<br>6<br>5<br>5 | 0<br>0<br>0<br>0<br>6<br>5<br>5 | 0<br>0<br>0<br>0<br>6<br>6<br>6 | 0<br>0<br>0<br>0<br>6<br>6<br>7 | 0<br>0<br>0<br>0<br>6<br>7<br>8 | 0<br>0<br>0<br>0<br>6<br>8<br>9 | 0<br>0<br>0<br>0<br>6<br>9<br>0 | 0<br>0<br>0<br>0<br>6<br>0<br>1 | 0<br>0<br>0<br>0<br>6<br>1<br>3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   |  | females<br>(cont...)            |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Sertoli Cell Tumor Benign                |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Oviduct                                  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Uterus                                   | +                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Adenocarcinoma                           |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Hemangiosarcoma                          |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Lymphoma Malignant                       |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Polyp Stromal                            |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Polyp Stromal, Multiple                  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Schwannoma Malignant                     |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Cervix, Leiomyosarcoma                   |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Cervix, Schwannoma Malignant             |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Vagina                                   |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Schwannoma Malignant                     |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|   | Schwannoma Malignant, Metastatic, Uterus |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| HEMATOPOIETIC SYSTEM  |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bone Marrow   |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lymph Node  |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Bronchial, Lymphoma Malignant   |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 | X                               |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Lumbar, Lymphoma Malignant  |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 | X                               |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Mediastinal, Lymphoma Malignant   |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 | X                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Pancreatic, Lymphoma Malignant  |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 | X                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Renal, Lymphoma Malignant   |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 | X                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| * .. Total animals with tissue examined microscopically; Total animals with tumor |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| + .. Tissue examined microscopically  |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X .. Lesion present   |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| I .. Insufficient tissue  |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| M .. Missing tissue   |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| A .. Autolysis precludes evaluation   |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| BLANK .. Not examined microscopically   |  |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr   | DAY ON TEST |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |                            |   | females<br>(cont...) |
|--|-------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|---|----------------------|
|  |             | 0<br>7<br>3<br>7           | 0<br>7<br>3<br>8           | 0<br>4<br>8<br>9           | 0<br>7<br>4<br>1           | 0<br>6<br>1<br>4           | 0<br>4<br>6<br>4           | 0<br>7<br>1<br>4           | 0<br>7<br>9<br>1           | 0<br>6<br>4<br>1           | 0<br>7<br>1<br>1           | 0<br>5<br>0<br>1           | 0<br>6<br>9<br>0           | 0<br>7<br>4<br>5           | 0<br>7<br>4<br>5           | 0<br>7<br>4<br>1           | 0<br>7<br>8<br>1           | 0<br>7<br>3<br>1           | 0<br>5<br>4<br>0           | 0<br>7<br>4<br>0           | 0<br>7<br>4<br>2           | 0<br>2<br>0<br>9           |                            |                            |   |                      |
| ANIMAL ID  |             | 0<br>0<br>0<br>6<br>3<br>5 | 0<br>0<br>0<br>6<br>3<br>6 | 0<br>0<br>0<br>6<br>3<br>7 | 0<br>0<br>0<br>6<br>3<br>9 | 0<br>0<br>0<br>6<br>4<br>1 | 0<br>0<br>0<br>6<br>4<br>2 | 0<br>0<br>0<br>6<br>4<br>3 | 0<br>0<br>0<br>6<br>4<br>4 | 0<br>0<br>0<br>6<br>4<br>5 | 0<br>0<br>0<br>6<br>4<br>6 | 0<br>0<br>0<br>6<br>4<br>7 | 0<br>0<br>0<br>6<br>4<br>8 | 0<br>0<br>0<br>6<br>4<br>9 | 0<br>0<br>0<br>6<br>5<br>1 | 0<br>0<br>0<br>6<br>5<br>2 | 0<br>0<br>0<br>6<br>5<br>3 | 0<br>0<br>0<br>6<br>5<br>4 | 0<br>0<br>0<br>6<br>5<br>5 | 0<br>0<br>0<br>6<br>5<br>6 | 0<br>0<br>0<br>6<br>5<br>7 | 0<br>0<br>0<br>6<br>5<br>8 | 0<br>0<br>0<br>6<br>5<br>9 | 0<br>0<br>0<br>6<br>6<br>0 |   |                      |
| Lymph Node, Mandibular Lymphoma Malignant                  |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | + | +                    |
| Lymph Node, Mesenteric Lymphoma Malignant                  |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | + | +                    |
| Spleen Hemangiosarcoma Lymphoma Malignant                  |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | + | +                    |
| Thymus Lymphoma Malignant Thymoma Benign Thymoma Malignant |             | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | +                          | + | +                    |

## INTEGUMENTARY SYSTEM

|   |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland Adenocarcinoma Adenocarcinoma, Multiple Adenoma Adenoma, Multiple Fibroadenoma Fibroadenoma, Multiple |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Skin Subcutaneous Tissue, Fibroma Subcutaneous Tissue, Malignant Fibrous Histiocytoma                               |  | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X | X |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically





**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

#### I .. Insufficient tissue



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |   |   |   |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|---|---|---|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |   |   |   |   |   |
|  | ANIMAL ID   | 3 | 6 | 5 | 7 | 7 | 6 | 4 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 6 | 5 | 6 | 7 | 7 | 4 | 4 | 4                    | 4 |   |   |   |   |
|  |             | 3 | 2 | 1 | 4 | 0 | 7 | 2 | 2 | 4 | 4 | 1 | 9 | 4 | 4 | 0 | 9 | 3 | 2 | 4 | 7 | 3 | 9 | 8 | 1 | 3                    | 2 | 0 | 1 | 4 | 4 |
| Islets, Pancreatic                                       |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    | X | X | + | + |   |
| Adenoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |   |   |   |   |
| Carcinoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |   |   |   |   |
| Parathyroid Gland  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | + | I | +                    | M | + |   |   |   |
| Pituitary Gland  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X | X                    | + | + | + | + |   |
| Pars Distalis, Adenoma                                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |   |   |   |   |
| Pars Distalis, Adenoma, Multiple                         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |   |   |   |   |
| Pars Distalis, Carcinoma                                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |   |   |   |   |
| Thyroid Gland  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | X |                      |   |   |   |   |   |
| C-cell, Adenoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |   |   |   |   |
| Follicular Cell, Carcinoma                               |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |   |   |   |   |   |

## GENERAL BODY SYSTEM

|                                    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------------------------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Tissue NOS                         | + |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Abdominal, Schwannoma Malignant    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Abdominal, Fat, Lymphoma Malignant |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

## GENITAL SYSTEM

|                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|--------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Clitoral Gland                 | + | + | + | + | + | + | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Ovary                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Cystadenoma                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Granulosa Cell Tumor Benign    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Granulosa Cell Tumor Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |  |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|--|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    |  |
|  | ANIMAL ID   | 3 | 6 | 5 | 7 | 7 | 6 | 4 | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 6 | 5 | 6 | 7 | 7 | 4 | 4 |                      |  |
|  |             | 5 | 6 | 3 | 4 | 4 | 3 | 6 | 9 | 3 | 4 | 4 | 1 | 9 | 4 | 4 | 4 | 3 | 2 | 3 | 3 | 0 | 1 | 2 | 4 | 4                    |  |
|  |             | 3 | 2 | 1 | 4 | 0 | 7 | 2 | 2 | 4 | 4 | 1 | 9 | 4 | 4 | 0 | 9 | 2 | 4 | 7 | 3 | 9 | 8 | 3 | 2 | 1                    |  |
| Lymph Node, Mandibular                                   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |  |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Lymph Node, Mesenteric                                   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |  |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Spleen   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |  |
| Hemangiosarcoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Thymus   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | +                    |  |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Thymoma Benign   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |
| Thymoma Malignant  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |  |

## INTEGUMENTARY SYSTEM

|  |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Mammary Gland                          |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Adenocarcinoma                         |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Adenocarcinoma, Multiple               |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |
| Adenoma                                |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Adenoma, Multiple                      |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Fibroadenoma, Multiple                 |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Skin                                   |  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Subcutaneous Tissue, Fibroma           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Subcutaneous Tissue, Malignant Fibrous |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Histiocytoma                           |  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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**Experiment Number:** 20105 - 56  
**Test Type:** CHRONIC  
**Route:** Whole Body Exposure  
**Species/Strain:** RATS/HSD

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

**Date Report Requested:** 01/02/2018  
**Time Report Requested:** 13:31:21  
**First Dose M/F:** 09/16/12 / 09/16/12  
**Lab:** IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |  |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|--|--|
|  |                       | 0<br>7<br>3<br>9      | 0<br>6<br>6<br>8      | 0<br>7<br>4<br>0      | 0<br>4<br>8<br>9      | 0<br>7<br>3<br>9      | 0<br>7<br>0<br>7      | 0<br>6<br>3<br>2      | 0<br>7<br>3<br>9      | 0<br>5<br>5<br>0      | 0<br>7<br>4<br>8      | 0<br>7<br>3<br>8      | 0<br>7<br>3<br>2      | 0<br>6<br>2<br>9      |  |  |  |
| ANIMAL ID  | 0<br>0<br>6<br>9<br>4 | 0<br>0<br>6<br>9<br>5 | 0<br>0<br>6<br>9<br>6 | 0<br>0<br>6<br>9<br>7 | 0<br>0<br>6<br>9<br>8 | 0<br>0<br>7<br>0<br>1 | 0<br>0<br>7<br>0<br>3 | 0<br>0<br>7<br>0<br>4 | 0<br>0<br>7<br>0<br>5 | 0<br>0<br>7<br>0<br>6 | 0<br>0<br>7<br>0<br>7 | 0<br>0<br>7<br>0<br>8 | 0<br>0<br>7<br>0<br>9 | 0<br>0<br>7<br>0<br>0 |  |  |  |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |  |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |  |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |  |
|  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |  |  |

\* **TOTALS**

**ALIMENTARY SYSTEM**

|                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Intestine Large, Cecum             | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | A | 84 |
| Intestine Large, Colon             | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 89 |
| Intestine Large, Rectum            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Granular Cell Tumor Benign         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Intestine Small, Duodenum          | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 88 |
| Intestine Small, Ileum             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | 86 |
| Intestine Small, Jejunum           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | A | 83 |
| Leiomyosarcoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Liver                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Hepatocellular Adenoma             | X |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | 7  |
| Lymphoma Malignant                 |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Mesentery                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 4  |
| Adenocarcinoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Oral Mucosa                        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   | 1  |
| Squamous Cell Carcinoma            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreas                           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr | DAY ON TEST                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|--|---|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|---------------------------------|--------|
|  |   | 0<br>7<br>3<br>9                | 0<br>6<br>6<br>8                | 0<br>7<br>4<br>0                | 0<br>4<br>8<br>9                | 0<br>7<br>3<br>9                | 0<br>6<br>3<br>2                | 0<br>7<br>3<br>6                | 0<br>7<br>3<br>7                | 0<br>5<br>3<br>0                | 0<br>7<br>4<br>8                | 0<br>7<br>3<br>8                | 0<br>7<br>2<br>9                | 0<br>6                          | 0<br>7<br>3<br>8                | 0<br>7<br>2<br>9                | 0<br>6 |
| ANIMAL ID  |   | 0<br>0<br>0<br>0<br>6<br>9<br>4 | 0<br>0<br>0<br>0<br>6<br>9<br>5 | 0<br>0<br>0<br>0<br>6<br>9<br>6 | 0<br>0<br>0<br>0<br>7<br>0<br>1 | 0<br>0<br>0<br>0<br>7<br>0<br>3 | 0<br>0<br>0<br>0<br>7<br>0<br>4 | 0<br>0<br>0<br>0<br>7<br>0<br>5 | 0<br>0<br>0<br>0<br>7<br>0<br>6 | 0<br>0<br>0<br>0<br>7<br>0<br>7 | 0<br>0<br>0<br>0<br>7<br>0<br>8 | 0<br>0<br>0<br>0<br>7<br>0<br>9 | 0<br>0<br>0<br>0<br>7<br>0<br>0 | 0<br>0<br>0<br>0<br>7<br>0<br>0 | 0<br>0<br>0<br>0<br>7<br>0<br>0 | 0<br>0<br>0<br>0<br>7<br>0<br>0 |        |
|  | Lymphoma Malignant                        | 1                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|  | Salivary Glands                           | 90                              |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|  | Stomach, Forestomach                      | 90                              |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|  | Lymphoma Malignant                        | 1                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|  | Sarcoma                                   | 1                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|  | Stomach, Glandular                        | 90                              |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|  | Sarcoma, Metastatic, Stomach, Forestomach | 1                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|  | Tongue                                    | 1                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |
|  | Squamous Cell Carcinoma                   | 1                               |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |                                 |        |

**\* TOTALS**

| CARDIOVASCULAR SYSTEM |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-----------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Aorta                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Heart                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymphoma Malignant    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

| ENDOCRINE SYSTEM        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Adrenal Cortex          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Adenoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Adrenal Medulla         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 86 |
| Pheochromocytoma Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr | DAY ON TEST                |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          |
|--|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|----------|
|  |                            | 0<br>7<br>3<br>9           | 0<br>6<br>6<br>8           | 0<br>7<br>4<br>0           | 0<br>4<br>8<br>9           | 0<br>7<br>3<br>9      | 0<br>6<br>3<br>2      | 0<br>7<br>3<br>6      | 0<br>7<br>3<br>7      | 0<br>5<br>3<br>0      | 0<br>7<br>4<br>8      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>8      | 0<br>7<br>3<br>2      | 0<br>6<br>2<br>9      |    |          |
| ANIMAL ID  |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | * TOTALS |
|  | 0<br>0<br>0<br>6<br>9<br>4 | 0<br>0<br>0<br>6<br>9<br>5 | 0<br>0<br>0<br>6<br>9<br>6 | 0<br>0<br>0<br>6<br>9<br>7 | 0<br>0<br>0<br>6<br>9<br>8 | 0<br>0<br>0<br>7<br>0 | 0<br>0<br>0<br>7<br>1 | 0<br>0<br>0<br>7<br>3 | 0<br>0<br>0<br>7<br>4 | 0<br>0<br>0<br>6<br>5 | 0<br>0<br>0<br>7<br>6 | 0<br>0<br>0<br>7<br>7 | 0<br>0<br>0<br>7<br>8 | 0<br>0<br>0<br>7<br>9 | 0<br>0<br>0<br>7<br>0 |    |          |
| Islets, Pancreatic                                       | +                          | +                          | +                          | +                          | +                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90 |          |
| Adenoma  |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X  | 5        |
| Carcinoma  |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 2        |
| Parathyroid Gland  | +                          | +                          | +                          | +                          | +                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 87 |          |
| Pituitary Gland  | +                          | +                          | +                          | +                          | +                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90 |          |
| Pars Distalis, Adenoma                                   |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 42       |
| Pars Distalis, Adenoma, Multiple                         |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Pars Distalis, Carcinoma                                 |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Thyroid Gland  | +                          | +                          | +                          | +                          | +                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90 |          |
| C-cell, Adenoma  |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X  | 6        |
| Follicular Cell, Carcinoma                               |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| <b>GENERAL BODY SYSTEM</b>                               |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          |
| Tissue NOS   | +                          | +                          |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 8        |
| Abdominal, Schwannoma Malignant                          |                            |                            | X                          |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Abdominal, Fat, Lymphoma Malignant                       |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| <b>GENITAL SYSTEM</b>                                    |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |          |
| Clitoral Gland   | +                          | M                          | +                          | +                          | +                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 87 |          |
| Ovary  | +                          | +                          | +                          | +                          | +                          | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90 |          |
| Cystadenoma  |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Granulosa Cell Tumor Benign                              |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 1        |
| Granulosa Cell Tumor Malignant                           |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 2        |
| Lymphoma Malignant                                       |                            |                            |                            |                            |                            |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | 2        |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
|  |                       | 0<br>7<br>3<br>9      | 0<br>6<br>6<br>8      | 0<br>7<br>4<br>0      | 0<br>4<br>8<br>9      | 0<br>7<br>3<br>9 | 0<br>6<br>3<br>2 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>7 | 0<br>5<br>3<br>0 | 0<br>7<br>4<br>8 | 0<br>7<br>3<br>8 | 0<br>7<br>3<br>2 | 0<br>6<br>2<br>9 |                  |                  |                  |
| ANIMAL ID  | 0<br>0<br>6<br>9<br>4 | 0<br>0<br>6<br>9<br>5 | 0<br>0<br>6<br>9<br>6 | 0<br>0<br>6<br>9<br>7 | 0<br>0<br>6<br>9<br>8 | 0<br>0<br>7<br>0 |

\* TOTALS

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Sertoli Cell Tumor Benign                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Oviduct                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Uterus                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Adenocarcinoma                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Hemangiosarcoma                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Lymphoma Malignant                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Polyp Stromal                            | X | X | X |   |   |   |   |   |   |   |   |   |   |   |   |   | 15 |
| Polyp Stromal, Multiple                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Schwannoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Cervix, Leiomyosarcoma                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Cervix, Schwannoma Malignant             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Vagina                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Schwannoma Malignant                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Schwannoma Malignant, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## HEMATOPOIETIC SYSTEM

|                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymph Node                      |   |   |   |   |   |   | + |   |   |   |   |   |   |   |   |   | 13 |
| Lymphoma Malignant              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Bronchial, Lymphoma Malignant   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lumbar, Lymphoma Malignant      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Mediastinal, Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreatic, Lymphoma Malignant  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Renal, Lymphoma Malignant       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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Test Type: CHRONIC

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  |          |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--|----------|
|  |                       | 0<br>7<br>3<br>9      | 0<br>6<br>6<br>8      | 0<br>7<br>4<br>0      | 0<br>4<br>8<br>9      | 0<br>7<br>3<br>9 | 0<br>6<br>3<br>2 | 0<br>7<br>3<br>6 | 0<br>7<br>3<br>7 | 0<br>5<br>3<br>0 | 0<br>7<br>4<br>8 | 0<br>7<br>3<br>0 | 0<br>7<br>3<br>8 | 0<br>7<br>2<br>9 | 0<br>6<br>2<br>9 |  |          |
| ANIMAL ID  | 0<br>0<br>6<br>9<br>4 | 0<br>0<br>6<br>9<br>5 | 0<br>0<br>6<br>9<br>6 | 0<br>0<br>6<br>9<br>7 | 0<br>0<br>6<br>9<br>8 | 0<br>0<br>7<br>0 | 0<br>0<br>7<br>1 | 0<br>0<br>7<br>3 | 0<br>0<br>5<br>4 | 0<br>0<br>6<br>5 | 0<br>0<br>7<br>6 | 0<br>0<br>7<br>7 | 0<br>0<br>7<br>8 | 0<br>0<br>7<br>9 | 0<br>0<br>7<br>0 |  |          |
|  |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |  | * TOTALS |

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Hemangiosarcoma        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Thymus                 | + | M | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 87 |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Thymoma Benign         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Thymoma Malignant      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

## INTEGUMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Mammary Gland                          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Adenocarcinoma                         | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 9  |
| Adenocarcinoma, Multiple               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Adenoma                                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Adenoma, Multiple                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Fibroadenoma                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 34 |
| Fibroadenoma, Multiple                 | X | X | X |   |   |   | X | X | X |   |   | X | X | X |   |   | 29 |
| Skin                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Subcutaneous Tissue, Fibroma           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Subcutaneous Tissue, Malignant Fibrous |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Histiocytoma                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |

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+ .. Tissue examined microscopically

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| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>0.0W/kg(CDMA)chr                          | DAY ON TEST                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
|---|---------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|
|   |                                 | 0<br>7<br>3<br>9      | 0<br>6<br>6<br>8      | 0<br>7<br>4<br>0      | 0<br>4<br>8<br>9      | 0<br>7<br>3<br>9      | 0<br>6<br>3<br>2      | 0<br>7<br>3<br>6      | 0<br>7<br>3<br>7      | 0<br>5<br>3<br>0      | 0<br>7<br>4<br>8      | 0<br>7<br>3<br>0      | 0<br>7<br>3<br>8      | 0<br>7<br>2<br>9      | 0<br>6<br>3<br>2      | 0<br>6<br>3<br>9      | 0<br>7<br>2<br>9      |    |
| ANIMAL ID   | 0<br>0<br>6<br>9<br>4           | 0<br>0<br>6<br>9<br>5 | 0<br>0<br>6<br>9<br>6 | 0<br>0<br>6<br>9<br>7 | 0<br>0<br>6<br>9<br>8 | 0<br>0<br>7<br>0<br>1 | 0<br>0<br>7<br>0<br>3 | 0<br>0<br>7<br>0<br>4 | 0<br>0<br>7<br>0<br>5 | 0<br>0<br>7<br>0<br>6 | 0<br>0<br>7<br>0<br>7 | 0<br>0<br>7<br>0<br>8 | 0<br>0<br>7<br>0<br>9 | 0<br>0<br>7<br>0<br>0 | 0<br>0<br>7<br>0<br>1 | 0<br>0<br>7<br>0<br>0 | 0<br>0<br>7<br>0<br>0 |    |
|   | * TOTALS                        |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Subcutaneous Tissue, Sarcoma  |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |
| <b>MUSCULOSKELETAL SYSTEM</b>   |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Bone  | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Skeletal Muscle   | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| <b>NERVOUS SYSTEM</b>   |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Brain   | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Carcinoma, Metastatic, Pituitary Gland  |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Lymphoma Malignant  |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |
| Meninges, Granular Cell Tumor Benign  |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Nerve Trigeminal  | + + + + M + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 84 |
| Peripheral Nerve, Sciatic   | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Peripheral Nerve, Tibial  | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Spinal Cord, Cervical   | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Lymphoma Malignant  |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Spinal Cord, Lumbar   | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Spinal Cord, Thoracic   | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Trigeminal Ganglion   | + + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 81 |
| <b>RESPIRATORY SYSTEM</b>   |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| * .. Total animals with tissue examined microscopically; Total animals with tumor |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| + .. Tissue examined microscopically  |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| X .. Lesion present   |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| I .. Insufficient tissue  |                                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|   | DAY ON TEST |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |  |
|---|-------------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|----------|--|
|   |             | 0<br>7 | 0<br>6 | 0<br>7 | 0<br>4 | 0<br>7 | 0<br>7 | 0<br>4 | 0<br>6 | 0<br>7 | 0<br>5 | 0<br>7 | 0<br>7 | 0<br>7 | 0<br>6 |        |          |  |
| <b>HARLAN SPRAGUE DAWLEY RATS<br/>FEMALE<br/>0.0W/kg(CDMA)chr</b> | ANIMAL ID   | 3<br>9 | 6<br>8 | 4<br>0 | 8<br>9 | 3<br>9 | 0<br>7 | 9<br>2 | 3<br>6 | 3<br>7 | 3<br>9 | 5<br>0 | 3<br>8 | 4<br>0 | 3<br>8 | 2<br>9 |          |  |
|   |             | 0<br>0 | * TOTALS |  |
| Lung  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90     |          |  |
| Lymphoma Malignant  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 2        |  |
| Nose  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90     |          |  |
| Trachea   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 89     |          |  |
| <b>SPECIAL SENSES SYSTEM</b>                                      |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |  |
| Eye   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 88     |          |  |
| Harderian Gland   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90     |          |  |
| <b>URINARY SYSTEM</b>   |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |  |
| Kidney  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90     |          |  |
| Lymphoma Malignant  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Bilateral, Renal Tubule, Carcinoma                                |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Renal Tubule, Adenoma   |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Urinary Bladder   |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 88     |          |  |
| Leiomyosarcoma  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 1        |  |
| Schwannoma Malignant, Metastatic, Tissue<br>Nos                   |             |        |        |        |        | X      |        |        |        |        |        |        |        |        |        |        | 1        |  |
| <b>SYSTEMIC LESIONS</b>   |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        |          |  |
| Multiple Organ  |             | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | +      | 90     |          |  |
| Lymphoma Malignant  |             |        |        |        |        |        |        |        |        |        |        |        |        |        |        |        | 5        |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

# ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK : Not examined microscopically

X .. Lesion present  
I .. Insufficient tissue

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

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**Date Report Requested:** 01/02/2018

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Lab: IIT

## Leukemia Mononuclear Lymphoma Malignant

## Stomach, Forestomach Lymphoma Malignant

## Stomach, Glandular Lymphoma Malignant

## CARDIOVASCULAR SYSTEM

Aorta

Heart

Leukemia Mononuclear  
Lymphoma Malignant  
Endocardium, Schwann  
Myocardium, Schwanno

## **ENDOCRINE SYSTEM**

Adrenal Cortex  
Adenoma  
Leukemia Mononuclear  
Lymphoma Malignant

Adrenal Medulla  
Lymphoma Malignant  
Pheochromocytoma Benign  
Pheochromocytoma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

### I .. Insufficient tissue

M .. Missing tissue

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Lab: IIT

## **GENERAL BODY SYSTEM**

## Tissue NOS

## **GENITAL SYSTEM**

### **Clitoral Gland**

## Lymphoma Malignant

## Ovary

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

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Lab: IIT

| DAY ON TEST                          |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...)  |        |        |        |        |        |        |        |        |
|--------------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--------|--------|--------|--------|--------|--------|--------|--------|
|                                      | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>6                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>4                | 0<br>7                | 0<br>6                | 0<br>3                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>7                | 0<br>5                | 0<br>5                | 0<br>7                | 0<br>7                |        |        |        |        |        |        |        |        |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE | 1<br>4                | 3<br>9                | 2<br>3                | 4<br>0                | 4<br>1                | 9<br>6                | 3<br>9                | 3<br>8                | 3<br>9                | 0<br>0                | 3<br>1                | 5<br>0                | 0<br>1                | 1<br>0                | 4<br>0                | 4<br>4                | 3<br>7                | 3<br>9                | 8<br>8                | 9<br>1                | 3<br>8                | 3<br>9 |        |        |        |        |        |        |        |
| 1.5W/kg(CDMA)chr                     | 0<br>1<br>4<br>4<br>4 | 0<br>1<br>1<br>4<br>4 |        |        |        |        |        |        |        |        |
| ANIMAL ID                            | 6<br>7                | 8<br>8                | 9<br>9                | 0<br>0                | 1<br>1                | 2<br>2                | 3<br>3                | 4<br>4                | 5<br>5                | 5<br>5                | 5<br>5                | 5<br>5                | 5<br>5                | 5<br>5                | 6<br>6                | 7<br>7                | 8<br>8                | 9<br>9                | 0<br>0                | 1<br>1                | 2<br>2                | 3<br>3 | 5<br>5 | 6<br>6 | 7<br>7 | 8<br>8 | 9<br>9 | 0<br>0 | 1<br>1 |

Leukemia Mononuclear  
Lymphoma Malignant

+ M M + + +

## INTEGUMENTARY SYSTEM

Mammary Gland

+ +

Adenocarcinoma

Adenocarcinoma, Multiple

Adenoma

X

Fibroadenoma

X

Fibroadenoma, Multiple

X

Lymphoma Malignant

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

X

Skin

+ +

Keratoacanthoma

X

Subcutaneous Tissue, Lymphoma Malignant

Subcutaneous Tissue, Squamous Cell

Carcinoma

## MUSCULOSKELETAL SYSTEM

Bone

+ +

Skeletal Muscle

+ +

Lymphoma Malignant

## NERVOUS SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

BLANK .. Not examined microscopically

I .. Insufficient tissue

Experiment Number: 20105 - 56

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Route: Whole Body Exposure

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|                                      | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE<br>1.5W/kg(CDMA)chr |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | females<br>(cont...) |  |
|--------------------------------------|-------------|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------------------|--|
|                                      |             | 07  | 07 | 07 | 07 | 07 | 06 | 07 | 07 | 07 | 04 | 07 | 06 | 03 | 07 | 07 | 07 | 07 | 05 | 05 | 07 | 07 | 07 | 07 | 07 |                      |  |
|                                      | ANIMAL ID   | 014   | 93 | 20 | 41 | 69 | 33 | 33 | 49 | 30 | 96 | 99 | 00 | 13 | 51 | 01 | 40 | 44 | 79 | 78 | 71 | 38 | 39 | 33 | 39 |                      |  |
| Brain                                |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | X                    |  |
| Glioma Malignant                     |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Leukemia Mononuclear                 |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Lymphoma Malignant                   |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Neuroblastoma                        |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Sarcoma                              |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Meninges, Granular Cell Tumor Benign |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Pineal Gland, Pinealoma              |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Nerve Trigeminal                     |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Leukemia Mononuclear                 |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Peripheral Nerve, Sciatic            |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Leukemia Mononuclear                 |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Lymphoma Malignant                   |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Peripheral Nerve, Tibial             |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Leukemia Mononuclear                 |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Lymphoma Malignant                   |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Spinal Cord, Cervical                |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Leukemia Mononuclear                 |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Lymphoma Malignant                   |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Spinal Cord, Lumbar                  |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Lymphoma Malignant                   |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Spinal Cord, Thoracic                |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Leukemia Mononuclear                 |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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X .. Lesion present

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**Experiment Number:** 20105 - 56

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**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

## Cell Phone Radiation: CDMA

**Time Report Requested:** 13:31:21

**Route:** Whole Body Exposure

**CAS Number:** CELLPRADCDMA

**First Dose M/F:** 09/16/12 / 09/16/12

**Species/Strain:** RATS/HSD

Lab: IIT

### Lymphoma Malignant

## **SYSTEMIC LESIONS**

Multiple Organ  
Leukemia Mononuclear  
Lymphoma Malignant

females  
(cont...)

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

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Experiment Number: 20105 - 56

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Cell Phone Radiation: CDMA

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Date Report Requested: 01/02/2018

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   | females<br>(cont...) |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|---|----------------------|
|  |             | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>8      | 0<br>6<br>7<br>4      | 0<br>6<br>3<br>1      | 0<br>7<br>3<br>8      | 0<br>6<br>4<br>9      | 0<br>7<br>3<br>9      | 0<br>6<br>1<br>4      | 0<br>6<br>5<br>7      | 0<br>7<br>4<br>1      | 0<br>6<br>7<br>0      | 0<br>5<br>4<br>7      | 0<br>7<br>4<br>5      | 0<br>6<br>4<br>7      | 0<br>7<br>2<br>4      | 0<br>7<br>4<br>0      | 0<br>6<br>1<br>2      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>8      |                       |                       |                       |   |   |                      |
| ANIMAL ID  |             | 0<br>1<br>4<br>7<br>3 | 0<br>1<br>1<br>4<br>4 | 0<br>1<br>1<br>7<br>7 | 0<br>1<br>1<br>7<br>7 | 0<br>1<br>1<br>7<br>7 | 0<br>1<br>1<br>8<br>8 |   |   |                      |
| Esophagus  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |                      |
| Intestine Large, Cecum                                   |             | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | + | + | +                    |
| Intestine Large, Colon                                   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    |
| Intestine Large, Rectum                                  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | A                     | +                     | + | + | +                    |
| Intestine Small, Duodenum                                |             | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    |
| Intestine Small, Ileum                                   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    |
| Intestine Small, Jejunum                                 |             | +                     | +                     | +                     | A                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    |
| Liver  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    |
| Hepatocellular Adenoma                                   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |   |   |                      |
| Leukemia Mononuclear                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |   |   |                      |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      |
| Mesentery  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | +                     |                       |   |   |                      |
| Oral Mucosa  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      |
| Pancreas   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    |
| Leukemia Mononuclear                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |   |   |                      |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |                      |
| Salivary Glands  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + | +                    |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **GENERAL BODY SYSTEM**

### Tissue NOS

-

## **GENITAL SYSTEM**

### Clitoral Gland

## Lymphoma Malignant

\* .. Total animals with tissue examined microscopically: Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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Experiment Number: 20105 - 56

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...) |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|--|
|  |             | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>8      | 0<br>6<br>7<br>4      | 0<br>6<br>4<br>1      | 0<br>7<br>3<br>8      | 0<br>6<br>9<br>1      | 0<br>7<br>3<br>9      | 0<br>6<br>1<br>0      | 0<br>6<br>5<br>7      | 0<br>7<br>4<br>1      | 0<br>5<br>4<br>5      | 0<br>7<br>4<br>5      | 0<br>6<br>4<br>7      | 0<br>6<br>2<br>4      | 0<br>7<br>4<br>0      | 0<br>6<br>1<br>2      | 0<br>7<br>4<br>2      | 0<br>6<br>3<br>7      | 0<br>7<br>3<br>8      |                       |                       |                       |                       |                       |                      |  |
| ANIMAL ID  |             | 0<br>1<br>4<br>7<br>3 | 0<br>1<br>1<br>4<br>4 | 0<br>1<br>1<br>7<br>5 | 0<br>1<br>1<br>7<br>6 | 0<br>1<br>1<br>7<br>7 | 0<br>1<br>1<br>7<br>8 | 0<br>1<br>1<br>8<br>9 | 0<br>1<br>1<br>8<br>0 | 0<br>1<br>1<br>8<br>1 | 0<br>1<br>1<br>8<br>2 | 0<br>1<br>1<br>8<br>3 | 0<br>1<br>1<br>8<br>5 | 0<br>1<br>1<br>8<br>6 | 0<br>1<br>1<br>8<br>7 | 0<br>1<br>1<br>8<br>9 | 0<br>1<br>1<br>9<br>0 | 0<br>1<br>1<br>9<br>1 | 0<br>1<br>1<br>9<br>2 | 0<br>1<br>1<br>9<br>3 | 0<br>1<br>1<br>9<br>4 | 0<br>1<br>1<br>9<br>5 | 0<br>1<br>1<br>9<br>6 | 0<br>1<br>1<br>9<br>7 | 0<br>1<br>1<br>9<br>8 |                      |  |
| Cystadenocarcinoma                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Leukemia Mononuclear                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Uterus   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Carcinoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Leukemia Mononuclear                                     |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Polyp, Glandular   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Polyp Stromal  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Polyp Stromal, Multiple                                  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Vagina   |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Polyp, Stromal   |             | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |

## HEMATOPOIETIC SYSTEM

|                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |
|------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|
| Bone Marrow            | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |   |
| Leukemia Mononuclear   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |
| Lymph Node             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  | + |
| Lymph Node, Mandibular | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |   |
| Leukemia Mononuclear   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |
| Lymph Node, Mesenteric | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |   |
| Lymphoma Malignant     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |   |
| Spleen                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|                                      | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE<br>1.5W/kg(CDMA)chr |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...) |  |
|--------------------------------------|-------------|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|--|
|                                      |             | 0<br>7<br>3<br>7                                      | 0<br>7<br>3<br>8      | 0<br>6<br>7<br>4      | 0<br>6<br>4<br>1      | 0<br>7<br>3<br>8      | 0<br>6<br>9<br>1      | 0<br>7<br>3<br>9      | 0<br>6<br>1<br>0      | 0<br>6<br>5<br>7      | 0<br>7<br>4<br>1      | 0<br>6<br>7<br>0      | 0<br>5<br>4<br>5      | 0<br>7<br>4<br>5      | 0<br>6<br>4<br>7      | 0<br>6<br>2<br>4      | 0<br>7<br>4<br>0      | 0<br>6<br>1<br>2      | 0<br>7<br>4<br>7      | 0<br>6<br>3<br>8      |                       |                       |                       |                       |                       |                      |  |
|                                      | ANIMAL ID   | 0<br>1<br>4<br>7<br>3                                 | 0<br>1<br>1<br>4<br>4 | 0<br>1<br>1<br>7<br>5 | 0<br>1<br>1<br>7<br>6 | 0<br>1<br>4<br>7<br>7 | 0<br>1<br>4<br>7<br>8 | 0<br>1<br>8<br>8<br>9 | 0<br>1<br>8<br>8<br>0 | 0<br>1<br>8<br>8<br>1 | 0<br>1<br>8<br>8<br>2 | 0<br>1<br>8<br>8<br>3 | 0<br>1<br>8<br>8<br>5 | 0<br>1<br>8<br>8<br>6 | 0<br>1<br>8<br>8<br>7 | 0<br>1<br>8<br>8<br>9 | 0<br>1<br>8<br>9<br>0 | 0<br>1<br>8<br>9<br>1 | 0<br>1<br>8<br>9<br>2 | 0<br>1<br>8<br>9<br>3 | 0<br>1<br>8<br>9<br>4 | 0<br>1<br>8<br>9<br>5 | 0<br>1<br>8<br>9<br>6 | 0<br>1<br>8<br>9<br>7 | 0<br>1<br>8<br>9<br>9 |                      |  |
| Brain                                |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Glioma Malignant                     |             |   | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                   |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Neuroblastoma                        |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Sarcoma                              |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Meninges, Granular Cell Tumor Benign |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Pineal Gland, Pinealoma              |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Nerve Trigeminal                     |             | +   | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Peripheral Nerve, Sciatic            |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                   |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Peripheral Nerve, Tibial             |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                   |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Spinal Cord, Cervical                |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                   |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Spinal Cord, Lumbar                  |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Lymphoma Malignant                   |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Spinal Cord, Thoracic                |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

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X .. Lesion present

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**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST |   | HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | females<br>(cont...) |   |   |
|-------------|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|---|---|
| ANIMAL ID   | 0 | 0  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    | 0 | 0 |
|             | 7 | 7  | 6 | 6 | 7 | 7 | 7 | 6 | 7 | 3 | 7 | 4 | 3 | 4 | 3 | 4 | 1 | 4 | 5 | 7 | 6 | 7                    | 6 | 7 |
| 3           | 3 | 7  | 9 | 4 | 3 | 3 | 8 | 9 | 1 | 9 | 0 | 9 | 4 | 9 | 1 | 4 | 7 | 1 | 4 | 7 | 0 | 4                    | 7 | 4 |
| 7           | 8 | 4  | 6 | 1 | 8 | 8 | 9 | 1 | 9 | 0 | 9 | 4 | 9 | 1 | 4 | 7 | 1 | 4 | 7 | 0 | 4 | 7                    | 1 | 2 |
| 0           | 0 | 0  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0                    | 0 | 0 |
| 1           | 1 | 1  | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1                    | 1 | 1 |
| 4           | 4 | 4  | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4 | 4                    | 4 | 5 |
| 7           | 7 | 7  | 7 | 7 | 7 | 7 | 7 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9                    | 9 | 0 |
| 3           | 4 | 5  | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7                    | 9 | 1 |

## Lymphoma Malignant

## Urinary Bladder

+ + + + + + A +

## **SYSTEMIC LESIONS**

Multiple Organ  
Leukemia Mononuclear  
Lymphoma Malignant

X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **ALIMENTARY SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|                                  | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE<br>1.5W/kg(CDMA)chr |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | females<br>(cont...) |     |
|----------------------------------|-------------|---|------|------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------------------|-----|
|                                  |             | 0729  | 0706 | 0711 | 071 | 038 | 000 | 073 | 030 | 077 | 047 | 071 | 088 | 079 | 055 | 060 | 050 | 062 | 041 | 074 | 064 | 044 | 079 | 038 | 064 | 074 | 069                  | 079 |
|                                  | ANIMAL ID   | 000   | 011  | 011  | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011 | 011                  | 011 |
| Islets, Pancreatic               |             | +   | A    | +    | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +                    |     |
| Adenoma                          |             | X   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Carcinoma                        |             |   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Parathyroid Gland                |             | +   | +    | +    | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | I   | +   | +   | M   | +                    |     |
| Pituitary Gland                  |             | +   | +    | +    | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +                    |     |
| Leukemia Mononuclear             |             |   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Lymphoma Malignant               |             | X   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Pars Distalis, Adenoma           |             | X   | X    | X    |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Pars Distalis, Adenoma, Multiple |             |   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Pars Distalis, Carcinoma         |             |   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Thyroid Gland                    |             | +   | +    | +    | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +   | +                    |     |
| Leukemia Mononuclear             |             |   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Lymphoma Malignant               |             | X   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| C-cell, Adenoma                  |             |   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| C-cell, Carcinoma                |             |   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |
| Follicular Cell, Carcinoma       |             |   |      |      |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |                      |     |

## GENERAL BODY SYSTEM

|            |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Tissue NOS | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

## GENITAL SYSTEM

|                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Clitoral Gland | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|----------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

|                    |   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Lymphoma Malignant | X |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|--------------------|---|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

|       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Ovary | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|-------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **HEMATOPOIETIC SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

M .. Missing tissue

± .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X .. Lesion present

← Not examined microscopically

X .. Lesion present

**BLANK** :: Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|                                      | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE<br>1.5W/kg(CDMA)chr |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...) |  |
|--------------------------------------|-------------|---|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|--|
|                                      |             | 0<br>7<br>2<br>9                                      | 0<br>7<br>0<br>6      | 0<br>7<br>1<br>1      | 0<br>3<br>3<br>8      | 0<br>0<br>0<br>0      | 0<br>7<br>4<br>0      | 0<br>7<br>4<br>7      | 0<br>7<br>1<br>1      | 0<br>7<br>3<br>8      | 0<br>7<br>9<br>5      | 0<br>6<br>6<br>0      | 0<br>5<br>5<br>0      | 0<br>6<br>2<br>3      | 0<br>7<br>4<br>1      | 0<br>7<br>4<br>4      | 0<br>4<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>7<br>1<br>9      | 0<br>6<br>2<br>8      | 0<br>7<br>4<br>4      | 0<br>6<br>4<br>9      | 0<br>7<br>4<br>9      |                       |                       |                      |  |
|                                      | ANIMAL ID   | 0<br>1<br>5<br>0<br>4                                 | 1<br>1<br>5<br>0<br>5 | 1<br>1<br>5<br>1<br>2 | 1<br>1<br>5<br>1<br>3 | 1<br>1<br>5<br>1<br>4 | 1<br>1<br>5<br>1<br>5 | 1<br>1<br>5<br>1<br>6 | 1<br>1<br>5<br>1<br>7 | 1<br>1<br>5<br>1<br>8 | 1<br>1<br>5<br>1<br>9 | 1<br>1<br>5<br>2<br>0 | 1<br>1<br>5<br>2<br>1 | 1<br>1<br>5<br>2<br>2 | 1<br>1<br>5<br>2<br>3 | 1<br>1<br>5<br>2<br>4 | 1<br>1<br>5<br>2<br>5 | 1<br>1<br>5<br>2<br>6 | 1<br>1<br>5<br>2<br>7 | 1<br>1<br>5<br>2<br>8 | 1<br>1<br>5<br>2<br>9 | 1<br>1<br>5<br>3<br>0 | 1<br>1<br>5<br>3<br>1 | 1<br>1<br>5<br>3<br>2 | 1<br>1<br>5<br>3<br>3 |                      |  |
| Brain                                |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Glioma Malignant                     |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                      |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     | X                     |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                   |             | X   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Neuroblastoma                        |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Sarcoma                              |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Meninges, Granular Cell Tumor Benign |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Pineal Gland, Pinealoma              |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Nerve Trigeminal                     |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | I                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                      |  |
| Peripheral Nerve, Sciatic            |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                   |             | X   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Peripheral Nerve, Tibial             |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                   |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Spinal Cord, Cervical                |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                      |  |
| Lymphoma Malignant                   |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                      |  |
| Spinal Cord, Lumbar                  |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Lymphoma Malignant                   |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                      |  |
| Spinal Cord, Thoracic                |             | +   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                    |  |
| Leukemia Mononuclear                 |             |   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                      |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

Date Report Requested: 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

### Lymphoma Malignant

X

## Urinary Bladder

## **SYSTEMIC LESIONS**

Multiple Organ  
Leukemia Mononuclear  
Lymphoma Malignant

+ + + + + + + + + + + + + + + X + X + + + + + + + + + + + + + + + + + + +

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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Experiment Number: 20105 - 56

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
|  |             | 0<br>7<br>4<br>0      | 0<br>6<br>7<br>6      | 0<br>5<br>3<br>2      | 0<br>7<br>9<br>9      | 0<br>6<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>7<br>4<br>1      | 0<br>0<br>0<br>0      | 0<br>7<br>1<br>1      | 0<br>6<br>9<br>5      | 0<br>6<br>9<br>6      | 0<br>6<br>9<br>9      | 0<br>6<br>9<br>7      | 0<br>7<br>3<br>7      |  |
| ANIMAL ID  |             | 0<br>1<br>5<br>3<br>4 | 0<br>1<br>5<br>3<br>5 | 0<br>1<br>5<br>3<br>5 | 0<br>1<br>5<br>4<br>0 | 0<br>1<br>5<br>4<br>1 | 0<br>1<br>5<br>4<br>2 | 0<br>1<br>5<br>4<br>3 | 0<br>1<br>5<br>4<br>4 | 0<br>1<br>5<br>4<br>5 | 0<br>1<br>5<br>4<br>6 | 0<br>1<br>5<br>4<br>7 | 0<br>1<br>5<br>4<br>8 | 0<br>1<br>5<br>4<br>9 | 0<br>1<br>5<br>5<br>0 |  |
|  | *           | * TOTALS              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |

## ALIMENTARY SYSTEM

|                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Intestine Large, Cecum    | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 82 |
| Intestine Large, Colon    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 89 |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 88 |
| Intestine Small, Duodenum | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 86 |
| Intestine Small, Ileum    | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | 83 |
| Intestine Small, Jejunum  | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + | 81 |
| Liver                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Hepatocellular Adenoma    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Leukemia Mononuclear      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Lymphoma Malignant        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Mesentery                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Oral Mucosa               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Pancreas                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Leukemia Mononuclear      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Salivary Glands           | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |          |
|--|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--------|----------|
|  |                       | 0<br>7<br>4<br>0      | 0<br>6<br>7<br>6      | 0<br>5<br>3<br>2      | 0<br>7<br>9<br>9 | 0<br>6<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>3<br>0<br>1 | 0<br>7<br>4<br>0 | 0<br>6<br>9<br>5 | 0<br>6<br>9<br>6 | 0<br>6<br>9<br>9 | 0<br>6<br>9<br>7 | 0<br>7<br>3<br>7 |        |          |
| ANIMAL ID  |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | * TOTALS |
|  | 0<br>1<br>5<br>3<br>4 | 0<br>1<br>5<br>3<br>5 | 0<br>1<br>5<br>3<br>6 | 0<br>1<br>5<br>3<br>7 | 0<br>1<br>5<br>4 | 0<br>1<br>4      | 0<br>4           | 0<br>4           | 0<br>4           | 0<br>5           | 0<br>6           | 0<br>7           | 0<br>8           | 0<br>9           | 0<br>0 |          |
| Leukemia Mononuclear                                     |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Stomach, Forestomach                                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Stomach, Glandular                                       | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| <b>CARDIOVASCULAR SYSTEM</b>                             |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |          |
| Aorta  | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Heart  | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Leukemia Mononuclear                                     |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 3        |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Endocardium, Schwannoma Malignant                        |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Myocardium, Schwannoma Malignant                         |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| <b>ENDOCRINE SYSTEM</b>                                  |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |          |
| Adrenal Cortex   | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Adenoma  |                       |                       |                       |                       |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |        | 2        |
| Leukemia Mononuclear                                     |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 2        |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Adrenal Medulla  | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 89       |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Pheochromocytoma Benign                                  |                       |                       |                       |                       |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  |        | 7        |
| Pheochromocytoma Malignant                               |                       |                       |                       |                       |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |        | 2        |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST |                                  |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          | * TOTALS |
|--|-------------|----------------------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------|----------|
|  |             | 0<br>7<br>4<br>0                 | 0<br>6<br>7<br>6      | 0<br>5<br>3<br>2      | 0<br>7<br>9<br>9      | 0<br>6<br>2<br>9 | 0<br>7<br>4<br>1 | 0<br>3<br>0<br>0 | 0<br>7<br>4<br>0 | 0<br>6<br>9<br>1 | 0<br>6<br>9<br>5 | 0<br>6<br>9<br>6 | 0<br>6<br>9<br>9 | 0<br>6<br>9<br>7 | 0<br>6<br>9<br>7 | 0<br>6<br>9<br>7 |          |          |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr | ANIMAL ID   | 0<br>1<br>5<br>3<br>4            | 0<br>1<br>5<br>3<br>5 | 0<br>1<br>5<br>3<br>5 | 0<br>1<br>5<br>4<br>4 | 0<br>1<br>4<br>4 | 0<br>1<br>4<br>4 | 0<br>1<br>4<br>4 | 0<br>1<br>5<br>4 | * TOTALS |          |
|  |             | Islets, Pancreatic               | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 89       |          |
|  |             | Adenoma                          |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 4        |          |
|  |             | Carcinoma                        |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2        |          |
|  |             | Parathyroid Gland                | +                     | +                     | M                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 80       |          |
|  |             | Pituitary Gland                  | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 89       |          |
|  |             | Leukemia Mononuclear             |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3        |          |
|  |             | Lymphoma Malignant               |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |          |
|  |             | Pars Distalis, Adenoma           | X                     |                       |                       | X                | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  | 40       |          |
|  |             | Pars Distalis, Adenoma, Multiple |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |          |
|  |             | Pars Distalis, Carcinoma         |                       |                       |                       |                  |                  |                  |                  | X                |                  | X                |                  |                  |                  |                  | 1        |          |
|  |             | Thyroid Gland                    | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90       |          |
|  |             | Leukemia Mononuclear             |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |          |
|  |             | Lymphoma Malignant               |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |          |
|  |             | C-cell, Adenoma                  |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 9        |          |
|  |             | C-cell, Carcinoma                |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3        |          |
|  |             | Follicular Cell, Carcinoma       |                       |                       |                       |                  |                  |                  | X                |                  |                  |                  |                  |                  |                  |                  | 1        |          |
| <b>GENERAL BODY SYSTEM</b>                               |             |                                  |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |          |
| Tissue NOS   |             |                                  |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 11       |          |
| <b>GENITAL SYSTEM</b>                                    |             |                                  |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |          |
| Clitoral Gland   | +           | +                                | M                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 88       |          |
| Lymphoma Malignant                                       |             |                                  |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |          |
| Ovary  | +           | +                                | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90       |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |          |
|--|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|--------|----------|
|  |                       | 0<br>7<br>4<br>0      | 0<br>6<br>7<br>6      | 0<br>5<br>3<br>2      | 0<br>7<br>9<br>9 | 0<br>6<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>3<br>0<br>1 | 0<br>7<br>4<br>0 | 0<br>6<br>9<br>5 | 0<br>6<br>9<br>6 | 0<br>6<br>9<br>9 | 0<br>6<br>9<br>7 | 0<br>7<br>3<br>7 |        |          |
| ANIMAL ID  |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | * TOTALS |
|  | 0<br>1<br>5<br>3<br>4 | 0<br>1<br>5<br>3<br>5 | 0<br>1<br>5<br>3<br>6 | 0<br>1<br>5<br>3<br>7 | 0<br>1<br>5<br>4 | 0<br>1<br>4      | 0<br>4           | 0<br>4           | 0<br>4           | 0<br>5           | 0<br>5           | 0<br>4           | 0<br>4           | 0<br>8           | 0<br>9 | 0        |
| Cystadenocarcinoma                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Leukemia Mononuclear                                     |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 2        |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Uterus   | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Carcinoma  |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X      | 1        |
| Leukemia Mononuclear                                     |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Polyp, Glandular   |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 2        |
| Polyp Stromal  |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 11       |
| Polyp Stromal, Multiple                                  |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 4        |
| Vagina   |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Polyp, Stromal   |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| <b>HEMATOPOIETIC SYSTEM</b>                              |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        |          |
| Bone Marrow  | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Leukemia Mononuclear                                     |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Lymph Node   |                       |                       |                       |                       |                  |                  | +                |                  |                  |                  |                  |                  |                  |                  |        | 8        |
| Lymph Node, Mandibular                                   | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Leukemia Mononuclear                                     |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Lymph Node, Mesenteric                                   | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |        | 1        |
| Spleen   | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +      | 90       |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr | DAY ON TEST |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
|--|-------------|-------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|
|  |             | 0<br>7<br>4<br>0              | 0<br>6<br>7<br>6      | 0<br>5<br>3<br>2      | 0<br>7<br>9<br>9      | 0<br>6<br>2<br>9      | 0<br>7<br>2<br>9      | 0<br>3<br>0<br>1      | 0<br>7<br>4<br>0      | 0<br>6<br>9<br>5      | 0<br>6<br>9<br>6      | 0<br>6<br>9<br>9      | 0<br>6<br>9<br>7      | 0<br>7<br>3<br>7      |                       |                       |    |
| ANIMAL ID  |             | 0<br>1<br>5<br>3<br>4         | 0<br>1<br>5<br>3<br>5 | 0<br>1<br>5<br>3<br>6 | 0<br>1<br>5<br>3<br>7 | 0<br>1<br>5<br>4<br>0 | 0<br>1<br>5<br>4<br>1 | 0<br>1<br>5<br>4<br>2 | 0<br>1<br>5<br>4<br>3 | 0<br>1<br>5<br>4<br>4 | 0<br>1<br>5<br>4<br>5 | 0<br>1<br>5<br>4<br>6 | 0<br>1<br>5<br>4<br>7 | 0<br>1<br>5<br>4<br>8 | 0<br>1<br>5<br>4<br>9 | 0<br>1<br>5<br>5<br>0 |    |
|  |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| * TOTALS   |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Brain  |             | + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Glioma Malignant   |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3  |
| Leukemia Mononuclear                                     |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |
| Lymphoma Malignant                                       |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Neuroblastoma  |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Sarcoma  |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Meninges, Granular Cell Tumor Benign                     |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Pineal Gland, Pinealoma                                  |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| X  |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    |
| Nerve Trigeminal   |             | + + + + + + + M               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 84 |
| Leukemia Mononuclear                                     |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Peripheral Nerve, Sciatic                                |             | + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Leukemia Mononuclear                                     |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |
| Lymphoma Malignant                                       |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Peripheral Nerve, Tibial                                 |             | + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Leukemia Mononuclear                                     |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Lymphoma Malignant                                       |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Spinal Cord, Cervical                                    |             | + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Leukemia Mononuclear                                     |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Lymphoma Malignant                                       |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Spinal Cord, Lumbar                                      |             | + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Lymphoma Malignant                                       |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |
| Spinal Cord, Thoracic                                    |             | + + + + + + + + + + + + + + + |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 90 |
| Leukemia Mononuclear                                     |             |                               |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>1.5W/kg(CDMA)chr | DAY ON TEST                   |                               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |
|--|-------------------------------|-------------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------|
|  |                               | 0<br>7<br>4<br>0              | 0<br>6<br>7<br>6 | 0<br>5<br>3<br>2 | 0<br>7<br>9<br>9 | 0<br>6<br>2<br>9 | 0<br>7<br>2<br>9 | 0<br>7<br>4<br>1 | 0<br>0<br>0<br>0 | 0<br>7<br>1<br>1 | 0<br>6<br>9<br>5 | 0<br>6<br>9<br>6 | 0<br>6<br>9<br>9 | 0<br>6<br>9<br>7 | 0<br>7<br>3<br>7 |          |
| ANIMAL ID  |                               |                               |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS |
|  | Lymphoma Malignant            | + + + + + + + + + + + + + + + | 1                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |
| Urinary Bladder  | + + + + + + + + + + + + + + + | 88                            |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |

## SYSTEMIC LESIONS

Multiple Organ  
Leukemia Mononuclear  
Lymphoma Malignant

|                               |    |
|-------------------------------|----|
| + + + + + + + + + + + + + + + | 90 |
|                               | 3  |
|                               | 2  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

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Lab: IIT

# ALIMENTARY SYSTEM

## Esophagus

Intestine Large, Cecum  
Histiocytic Sarcoma, Metastatic, Uterus  
Lymphoma Malignant

Intestine Large, Colon  
Histiocytic Sarcoma, Metastatic, Uterus  
Lymphoma Malignant

Intestine Large, Rectum  
Lymphoma Malignant

### Intestine Small. Duodenum

**Intestine Small, Ileum  
Lymphoma Malignant**

## Intestine Small, Jejunum

Liver  
Carcinoma, Metastatic, Adrenal Cortex  
Hepatocellular Adenoma  
Lymphoma Malignant

Mesentery  
Histiocytic Sarcoma, Metastatic, Uterus  
Lymphoma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

#### 1.1. Insufficient tissue

M .. Missing tissue  
A .. Autolysis precludes evaluation  
BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type:** CHRONIC

Cell Phone Radiation: CDMA

Time Report Requested: 13:31:21

#### **Route:** Whole Body Exposure

**CAS Number:** CEI | PRADCDMA

**First Dose M/F:** 09/16/12 / 09/16/12

**Species/Strain:** RATS/HSD

Lab: IIIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | DAY ON TEST | ANIMAL ID |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | females<br>(cont...) |
|--|-------------|-----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------------------|
|  |             |           | 0<br>5<br>4<br>5      | 0<br>7<br>3<br>7      | 0<br>7<br>3<br>8      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>9      | 0<br>5<br>3<br>1      | 0<br>6<br>6<br>9      | 0<br>6<br>3<br>1      | 0<br>7<br>3<br>9      | 0<br>6<br>3<br>9      | 0<br>5<br>0<br>3      | 0<br>7<br>3<br>8      | 0<br>7<br>4<br>1      | 0<br>7<br>3<br>9      | 0<br>7<br>3<br>9      | 0<br>7<br>4<br>4      | 0<br>7<br>4<br>4      | 0<br>6<br>7<br>4      | 0<br>7<br>3<br>7      | 0<br>7<br>4<br>1      | 0<br>7<br>3<br>8     |
|  |             |           | 0<br>1<br>6<br>5<br>6 | 0<br>1<br>6<br>5<br>6 | 0<br>1<br>6<br>5<br>6 | 0<br>1<br>6<br>6<br>6 |                      |
|  |             |           | 1<br>6<br>5<br>6      |                       |                      |
|  |             |           | 6<br>5<br>6           |                       |                      |
|  |             |           | 5<br>6<br>7           |                       |                      |
|  |             |           | 6<br>7                | 8<br>8                | 9<br>0                | 9<br>1                | 2<br>2                | 3<br>3                | 5<br>5                | 7<br>7                | 8<br>8                | 0<br>1                | 2<br>2                | 3<br>3                | 5<br>5                | 7<br>7                | 8<br>8                | 0<br>1                | 2<br>2                | 3<br>3                | 5<br>5                | 7<br>7                |                      |

## CARDIOVASCULAR SYSTEM

# **ENDOCRINE SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

M .. Missing tissue

+ .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X., Lesion present

BLANK .. Not examined microscopically

#### I. Insufficient tissue

~~DE WIT NOT EXAMINED UNDERSPECIMEN~~

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **GENERAL BODY SYSTEM**

### Tissue NOS

## Abdominal, Fat, Lipoma

-

## **GENITAL SYSTEM**

### Clitoral Gland

\* .. Total animals with tissue examined microscopically: Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically









**Experiment Number:** 20105 - 56

**Test Type:** CHRONIC

#### **Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

Date Report Requested: 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST |   | HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |                      |
|-------------|---|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------------------|
| ANIMAL ID   | 0 | 0  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | females<br>(cont...) |
|             | 5 | 5  | 7 | 7 | 7 | 7 | 7 | 5 | 5 | 6 | 6 | 7 | 6 | 5 | 0 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |                      |
|             | 4 | 4  | 3 | 3 | 3 | 4 | 4 | 4 | 4 | 9 | 3 | 9 | 1 | 9 | 9 | 0 | 3 | 8 | 1 | 9 | 3 | 8 | 4 |                      |
|             | 5 | 5  | 7 | 8 | 8 | 5 | 4 | 4 | 4 | 9 | 1 | 9 | 1 | 9 | 9 | 3 | 8 | 1 | 9 | 3 | 8 | 4 |   |                      |
|             | 0 | 0  | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |   |                      |
|             | 1 | 1  | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |                      |
|             | 6 | 6  | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |                      |
|             | 5 | 5  | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 |                      |
|             | 6 | 6  | 7 | 8 | 8 | 9 | 0 | 1 | 2 | 3 | 5 | 7 | 8 | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |                      |

### Bilateral, Renal Tubule, Carcinom

## Perirenal Tissue, Lymphoma Malignant

### **Renal Tubule, Adenoma**

X

## Urinary Bladder

### Lymphoma Malignant

## **SYSTEMIC LESIONS**

## Multiple Organ

### Histiocytic Sarcoma

### Lymphoma Malignant

x

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopicall

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

**Test Type:** CHRONIC

### **Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

Date Report Requested: 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: II T

Stomach, Glandular  
Lymphoma Malignant + A + +

## CARDIOVASCULAR SYSTEM

## **ENDOCRINE SYSTEM**

Adrenal Medulla + + + + + + + + + + + + + + + + + + | + + + + + + +

\* .. Total animals with tissue examined microscopically: Total animals with tumor

± .. Tissue examined microscopically

X - Lesion present

| .. Insufficient tissue

M = Missing tissue

#### A .. Autolysis precludes evaluation

BLANK - Not examined microscopically













Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST                          |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--------------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|                                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE | 5 | 5 | 0 | 7 | 6 | 7 | 7 | 7 | 4 | 5 | 7 | 7 | 6 | 7 | 6 | 7 | 5 | 4 | 7 | 4 | 7 | 4 | 7 | 6 |
| 3.0W/kg(CDMA)chr                     | 4 | 1 | 1 | 3 | 5 | 4 | 3 | 4 | 1 | 8 | 5 | 4 | 3 | 4 | 2 | 4 | 9 | 9 | 4 | 7 | 4 | 1 | 4 | 3 |
| ANIMAL ID                            | 5 | 6 | 6 | 8 | 6 | 4 | 7 | 0 | 1 | 3 | 0 | 4 | 7 | 8 | 0 | 7 | 5 | 8 | 3 | 0 | 4 | 1 | 4 | 9 |
|                                      | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|                                      | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|                                      | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|                                      | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 3 | 4 | 4 |
|                                      | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 7 | 9 | 0 | 2 | 4 | 5 | 6 | 7 | 8 | 9 | 0 | 1 |

females  
(cont...)

## ALIMENTARY SYSTEM

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Cecum<br>Histiocytic Sarcoma, Metastatic, Uterus<br>Lymphoma Malignant        | + | + | + | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | + | + | + | + | + | + |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Intestine Large, Colon<br>Histiocytic Sarcoma, Metastatic, Uterus<br>Lymphoma Malignant        | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Intestine Large, Rectum<br>Lymphoma Malignant  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Intestine Small, Duodenum  | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Intestine Small, Ileum<br>Lymphoma Malignant   | + | + | A | + | + | + | + | + | + | + | + | + | + | A | + | A | + | + | + | + | + | + | + | + |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |
| Intestine Small, Jejunum   | + | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Liver<br>Carcinoma, Metastatic, Adrenal Cortex<br>Hepatocellular Adenoma<br>Lymphoma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Histiocytic Sarcoma, Metastatic, Uterus<br>Lymphoma Malignant                                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type:** CHRONIC

#### **Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

Date Report Requested: 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIIT

## CARDIOVASCULAR SYSTEM

# **ENDOCRINE SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

± Tissue examined microscopically

X Lesion present

| Insufficient tissue

M Missing tissue

#### A Autolysis precludes evaluation

**BLANK** Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **GENERAL BODY SYSTEM**

### Tissue NOS

### **Abdominal, Fat, Lipoma**

+ + + +

## **GENITAL SYSTEM**

### **Clitoral Gland**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **HEMATOPOIETIC SYSTEM**

\* .. Total animals with tissue examined microscopically; Total animals with tumor

#### M .. Missing tissue

+ .. Tissue examined microscopically

#### A .. Autolysis precludes evaluation

X .. Lesion present

**ANK .. Not examined microscopically**

| .. Insufficient tissue

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |             |   | females<br>(cont...) |  |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|-------------|---|----------------------|--|
|  |             | 0<br>5<br>4<br>5      | 0<br>0<br>1<br>6      | 0<br>7<br>1<br>6      | 0<br>6<br>5<br>6      | 0<br>7<br>4<br>4      | 0<br>7<br>0<br>7      | 0<br>4<br>1<br>3      | 0<br>5<br>4<br>0      | 0<br>7<br>4<br>3 | 0<br>6<br>4<br>8 | 0<br>7<br>2<br>7 | 0<br>6<br>4<br>5 | 0<br>7<br>9<br>8 | 0<br>5<br>9<br>3 | 0<br>4<br>9<br>0 | 0<br>7<br>4<br>4 | 0<br>7<br>1<br>1 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>9 | 0<br>6<br>6<br>2 |                  |                  |             |   |                      |  |
| ANIMAL ID  |             | 0<br>1<br>7<br>1<br>4 | 0<br>1<br>1<br>1<br>5 | 0<br>1<br>1<br>1<br>6 | 0<br>1<br>1<br>1<br>7 | 0<br>1<br>1<br>1<br>8 | 0<br>1<br>1<br>1<br>9 | 0<br>1<br>1<br>2<br>0 | 0<br>1<br>1<br>2<br>1 | 0<br>1<br>2<br>2 | 0<br>1<br>2<br>3 | 0<br>2<br>2<br>4 | 0<br>2<br>2<br>5 | 0<br>2<br>2<br>7 | 0<br>2<br>2<br>9 | 0<br>2<br>3<br>0 | 0<br>3<br>3<br>2 | 0<br>3<br>3<br>4 | 0<br>3<br>3<br>5 | 0<br>3<br>3<br>6 | 0<br>3<br>3<br>7 | 0<br>3<br>3<br>8 | 0<br>3<br>3<br>9 | 0<br>1<br>0 |   |                      |  |
| Lymph Node, Mesenteric                                   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +           | + | +                    |  |
| Histiocytic Sarcoma, Metastatic, Uterus                  |             |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |             |   |                      |  |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |             |   |                      |  |
| Spleen   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +           | + | +                    |  |
| Histiocytic Sarcoma                                      |             |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |             |   |                      |  |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |             |   |                      |  |
| Thymus   |             | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | M                | +                | +                | +                | +                | +                | I                | +                | +                | +                | +                | +                | +                | +                | +           | + |                      |  |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |             |   |                      |  |
| Thymoma Benign   |             |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |             |   |                      |  |

## INTEGUMENTARY SYSTEM

|                              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
|------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|--|
| Mammary Gland                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Adenocarcinoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Adenoma                      | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Fibroadenoma                 |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Fibroadenoma, Multiple       |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Lymphoma Malignant           |   |   |   | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Skin                         | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |  |
| Keratoacanthoma              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Lymphoma Malignant           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Subcutaneous Tissue, Fibroma |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |
| Subcutaneous Tissue, Lipoma  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |  |

## MUSCULOSKELETAL SYSTEM

|      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Bone | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically





**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST      |                  | HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                      |             |  |
|------------------|------------------|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------------|-------------|--|
| ANIMAL ID        | 0<br>5<br>4<br>5 | 0<br>0<br>1<br>6   | 0<br>7<br>3<br>8 | 0<br>6<br>5<br>6 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>7 | 0<br>7<br>0<br>0 | 0<br>7<br>1<br>3 | 0<br>5<br>5<br>0 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>7 | 0<br>6<br>4<br>8 | 0<br>7<br>2<br>0 | 0<br>6<br>2<br>7 | 0<br>7<br>4<br>5 | 0<br>5<br>9<br>8 | 0<br>4<br>9<br>3 | 0<br>4<br>4<br>0 | 0<br>7<br>4<br>4 | 0<br>7<br>1<br>1 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>9     | 0<br>6<br>2 |  |
|                  |                  | 0<br>1<br>1<br>4   | 0<br>1<br>1<br>5 | 0<br>1<br>1<br>6 | 0<br>1<br>1<br>7 | females<br>(cont...) |             |  |
| 0<br>5<br>4<br>5 | 0<br>0<br>1<br>6 | 0<br>0<br>1<br>6   | 0<br>7<br>3<br>8 | 0<br>6<br>5<br>6 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>7 | 0<br>7<br>0<br>0 | 0<br>7<br>1<br>3 | 0<br>5<br>5<br>0 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>7 | 0<br>6<br>4<br>8 | 0<br>7<br>2<br>0 | 0<br>6<br>2<br>7 | 0<br>7<br>4<br>5 | 0<br>5<br>9<br>8 | 0<br>4<br>9<br>3 | 0<br>4<br>4<br>0 | 0<br>7<br>4<br>4 | 0<br>7<br>1<br>1 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>9     | 0<br>6<br>2 |  |
| 0<br>1<br>1<br>4 | 0<br>1<br>1<br>5 | 0<br>1<br>1<br>6   | 0<br>1<br>1<br>7 | females<br>(cont...) |             |  |

Bilateral, Renal Tubule, Carcinoma  
Perirenal Tissue, Lymphoma Malignant  
Renal Tubule, Adenoma

## Urinary Bladder Lymphoma Malignant

## **SYSTEMIC LESIONS**

## Multiple Organ Histiocytic Sarcoma Lymphoma Malignant

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 7           | 7 | 5 | 4 | 4 | 7 | 7 | 7 | 7 | 7 | 7 | 4 | 7 | 4 | 7 | 4 | 7 |
|  | 4           | 3 | 3 | 9 | 6 | 4 | 1 | 4 | 4 | 3 | 3 | 9 | 4 | 5 | 4 | 5 | 4 |
|  | 5           | 9 | 1 | 3 | 4 | 0 | 1 | 4 | 1 | 8 | 9 | 3 | 1 | 0 | 0 | 1 | 1 |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|  | 7           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 |
|  | 4           | 4 | 4 | 4 | 4 | 4 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 6 | 6 |
|  | 3           | 4 | 5 | 6 | 7 | 9 | 1 | 2 | 4 | 5 | 6 | 7 | 8 | 9 | 0 |   |   |

\* TOTALS

## ALIMENTARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Esophagus                               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Intestine Large, Cecum                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 86 |
| Histiocytic Sarcoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Intestine Large, Colon                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 88 |
| Histiocytic Sarcoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Intestine Large, Rectum                 | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 87 |
| Lymphoma Malignant                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Intestine Small, Duodenum               | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 87 |
| Intestine Small, Ileum                  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 84 |
| Lymphoma Malignant                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Intestine Small, Jejunum                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 84 |
| Liver                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Carcinoma, Metastatic, Adrenal Cortex   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Hepatocellular Adenoma                  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Lymphoma Malignant                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4  |
| Mesentery                               | X |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
| Histiocytic Sarcoma, Metastatic, Uterus |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS              |
|--|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  |             | 0<br>7<br>4<br>5      | 0<br>7<br>3<br>9      | 0<br>4<br>6<br>4      | 0<br>7<br>4<br>0      | 0<br>7<br>1<br>1      | 0<br>7<br>4<br>4      | 0<br>7<br>3<br>1      | 0<br>7<br>8<br>8      | 0<br>7<br>3<br>9      | 0<br>4<br>3<br>3      | 0<br>7<br>9<br>3      | 0<br>4<br>5<br>1      | 0<br>4<br>5<br>1      | 0<br>7<br>4<br>1      | 0<br>4<br>5<br>1      |                       |                       |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | ANIMAL ID   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|  |             | 0<br>1<br>7<br>4<br>3 | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>4<br>4      | 0<br>1<br>4<br>4      | 0<br>1<br>7<br>7      |                       |
|  |             | 1<br>7<br>4<br>3<br>4 | 1<br>7<br>4<br>4<br>5 | 1<br>7<br>4<br>4<br>5 | 1<br>7<br>4<br>4<br>5 | 1<br>7<br>7<br>7<br>9 |                       |
|  |             | 5<br>6<br>7<br>6<br>7 | 6<br>6<br>7<br>6<br>7 |                       |
|  |             | 0<br>0<br>0<br>0<br>0 |                       |
|  |             | 0<br>1<br>7<br>4<br>3 | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>7<br>7<br>7 |
|  |             | 7<br>7<br>7<br>7<br>7 |
|  |             | 4<br>4<br>4<br>4<br>4 | 4<br>4<br>4<br>4<br>4 | 4<br>4<br>4<br>4<br>4 | 4<br>4<br>4<br>4<br>4 | 4<br>4<br>5<br>5<br>5 |
|  |             | 3<br>3<br>4<br>4<br>4 | 4<br>4<br>5<br>5<br>5 | 5<br>6<br>7<br>6<br>7 | 6<br>6<br>7<br>6<br>7 | 7<br>9<br>1<br>2      |                       |
| Pancreas   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |
| Salivary Glands  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Stomach, Forestomach                                     |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |
| Stomach, Glandular                                       |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 89                    |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3                     |
| <b>CARDIOVASCULAR SYSTEM</b>                             |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Aorta  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Heart  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Adenocarcinoma, Metastatic, Mammary Gland                |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| <b>ENDOCRINE SYSTEM</b>                                  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| Adrenal Cortex   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90                    |
| Adenoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Carcinoma  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |
| Adrenal Medulla  |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 87                    |
| Lymphoma Malignant                                       |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | DAY ON TEST             |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |
|--|-------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------|
|  |                         | 0<br>7<br>4<br>5 | 0<br>7<br>3<br>9 | 0<br>4<br>6<br>4 | 0<br>7<br>4<br>1 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>8 | 0<br>4<br>3<br>3 | 0<br>7<br>9<br>0 | 0<br>4<br>7<br>1 | 0<br>4<br>5<br>0 | 0<br>4<br>5<br>1 | 0<br>4<br>5<br>0 | 0<br>4<br>5<br>1 | 0<br>4<br>5<br>0 | 0<br>4<br>5<br>1 |          |
| ANIMAL ID  |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS |
|  | Pheochromocytoma Benign | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3        |
| Pheochromocytoma Complex                                 |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |
| Pheochromocytoma Malignant                               |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |
| Islets, Pancreatic Adenoma                               |                         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90<br>5  |
| Parathyroid Gland Lymphoma Malignant                     |                         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 85<br>1  |
| Pituitary Gland Lymphoma Malignant                       |                         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 89<br>1  |
| Pars Distalis, Adenoma                                   |                         | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 30       |
| Pars Distalis, Carcinoma                                 |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |
| Thyroid Gland Lymphoma Malignant                         |                         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90<br>1  |
| Bilateral, C-cell, Carcinoma                             |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |
| C-cell, Adenoma  |                         | X                |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3        |
| C-cell, Carcinoma  |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2        |
| Follicular Cell, Adenoma                                 |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |
| <b>GENERAL BODY SYSTEM</b>                               |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |
| Tissue NOS   |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 8        |
| Abdominal, Fat, Lipoma                                   |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1        |
| <b>GENITAL SYSTEM</b>                                    |                         |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |          |
| Clitoral Gland   |                         | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 89       |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |    | * TOTALS |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----|----------|
|  |                       | 0<br>7<br>4<br>5      | 0<br>7<br>3<br>9      | 0<br>4<br>6<br>4      | 0<br>7<br>4<br>0      | 0<br>7<br>1<br>1      | 0<br>7<br>4<br>4      | 0<br>7<br>3<br>1      | 0<br>7<br>8<br>8      | 0<br>7<br>3<br>9      | 0<br>4<br>3<br>3      | 0<br>7<br>9<br>3      | 0<br>7<br>4<br>1      | 0<br>4<br>5<br>0      | 0<br>4<br>5<br>1      |    |          |
| ANIMAL ID  | 0<br>1<br>7<br>4<br>3 | 0<br>1<br>1<br>4<br>4 | 0<br>1<br>7<br>4<br>7 | 0<br>1<br>7<br>5<br>1 | 0<br>1<br>7<br>5<br>5 | 0<br>1<br>7<br>5<br>5 | 0<br>1<br>7<br>5<br>5 | 0<br>1<br>7<br>5<br>6 | 0<br>1<br>7<br>7<br>6 | 0<br>1<br>7<br>7<br>7 | 0<br>1<br>7<br>7<br>7 | 0<br>1<br>7<br>7<br>7 | 0<br>1<br>7<br>7<br>7 | 0<br>1<br>7<br>7<br>7 | 0<br>1<br>7<br>7<br>7 |    |          |
| Carcinoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |          |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |          |
| Ovary  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 89 |          |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3  |          |
| Rete Ovarii, Adenoma                                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |          |
| Uterus   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90 |          |
| Adenoma  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |          |
| Histiocytic Sarcoma                                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |          |
| Leiomyosarcoma   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |          |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 3  |          |
| Polyp, Glandular   |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |          |
| Polyp Stromal  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 9  |          |
| Polyp Stromal, Multiple                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4  |          |
| Squamous Cell Carcinoma                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |          |
| Cervix, Polyp Stromal                                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1  |          |
| Cervix, Schwannoma Malignant                             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2  |          |

## HEMATOPOIETIC SYSTEM

|                                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Bone Marrow                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymph Node                      | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 11 |
| Bronchial, Lymphoma Malignant   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Mediastinal, Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Pancreatic, Lymphoma Malignant  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymph Node, Mandibular          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 89 |
| Lymphoma Malignant              |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | DAY ON TEST<br>ANIMAL ID |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    | * TOTALS |
|--|--------------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----|----------|
|  |                          | 0<br>7<br>4<br>5 | 0<br>7<br>3<br>9 | 0<br>4<br>6<br>4 | 0<br>7<br>4<br>1 | 0<br>7<br>3<br>8 | 0<br>7<br>3<br>9 | 0<br>4<br>3<br>3 | 0<br>7<br>9<br>0 | 0<br>4<br>9<br>8 | 0<br>7<br>9<br>3 | 0<br>4<br>5<br>1 | 0<br>7<br>5<br>0 | 0<br>4<br>5<br>0 | 0<br>7<br>4<br>1 | 0<br>7<br>5<br>1 |    |          |
| Lymph Node, Mesenteric                                   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90 |          |
| Histiocytic Sarcoma, Metastatic, Uterus                  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1  |          |
| Lymphoma Malignant                                       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3  |          |
| Spleen   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90 |          |
| Histiocytic Sarcoma                                      |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1  |          |
| Lymphoma Malignant                                       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 4  |          |
| Thymus   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 87 |          |
| Lymphoma Malignant                                       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 2  |          |
| Thymoma Benign   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1  |          |
| <b>INTEGUMENTARY SYSTEM</b>                              |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |          |
| Mammary Gland  |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90 |          |
| Adenocarcinoma   |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  | 6  |          |
| Adenoma  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  |                  | 1  |          |
| Fibroadenoma   |                          | X                | X                | X                | X                |                  | X                |                  |                  |                  |                  |                  |                  | X                |                  |                  | 34 |          |
| Fibroadenoma, Multiple                                   |                          | X                |                  |                  | X                | X                |                  | X                | X                | X                | X                | X                |                  |                  | X                |                  | 29 |          |
| Lymphoma Malignant                                       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 3  |          |
| Skin   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90 |          |
| Keratoacanthoma  |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  |                  | 2  |          |
| Lymphoma Malignant                                       |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1  |          |
| Subcutaneous Tissue, Fibroma                             |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | X                |                  | 1  |          |
| Subcutaneous Tissue, Lipoma                              |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | 1  |          |
| <b>MUSCULOSKELETAL SYSTEM</b>                            |                          |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |    |          |
| Bone   |                          | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | +                | 90 |          |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST |  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |
|--|-------------|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|----|
|  |             | 0<br>7<br>4<br>5                       | 0<br>7<br>3<br>9      | 0<br>4<br>6<br>4      | 0<br>7<br>4<br>1      | 0<br>7<br>3<br>8      | 0<br>7<br>3<br>9      | 0<br>4<br>3<br>3      | 0<br>7<br>9<br>1      | 0<br>4<br>3<br>8      | 0<br>7<br>9<br>3      | 0<br>4<br>1<br>1      | 0<br>5<br>0<br>0      | 0<br>4<br>5<br>0      | 0<br>7<br>4<br>1      | * TOTALS |    |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | ANIMAL ID   | 0<br>1<br>7<br>4<br>3                  | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>7<br>5<br>5 |          |    |
|  |             | Vertebra, Chondroma                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |    |
|  |             | Skeletal Muscle                        | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90       |    |
|  |             | Lymphoma Malignant                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1  |
|  |             | <b>NERVOUS SYSTEM</b>                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |    |
|  |             | Brain                                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 90 |
|  |             | Lymphoma Malignant                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  |             | Nerve Trigeminal                       | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +                     | +                     | +                     | +        | 85 |
|  |             | Peripheral Nerve, Sciatic              | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 90 |
|  |             | Lymphoma Malignant                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1  |
|  |             | Peripheral Nerve, Tibial               | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 89 |
|  |             | Lymphoma Malignant                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  |             | Spinal Cord, Cervical                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 90 |
|  |             | Lymphoma Malignant                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  |             | Spinal Cord, Lumbar                    | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 89 |
|  |             | Lymphoma Malignant                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  |             | Spinal Cord, Thoracic                  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +        | 90 |
|  |             | Lymphoma Malignant                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 2  |
|  |             | Trigeminal Ganglion                    | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | M                     | +                     | +        | 81 |
|  |             | Carcinoma, Metastatic, Pituitary Gland |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          | 1  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

**P04: NEOPLASMS BY INDIVIDUAL ANIMAL**

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | DAY ON TEST |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |
|--|-------------|-----------------------|-----------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
|  |             | 0<br>7<br>4<br>5      | 0<br>7<br>3<br>9      | 0<br>4<br>6<br>4 | 0<br>7<br>4<br>1 | 0<br>7<br>4<br>4 | 0<br>7<br>3<br>8 | 0<br>7<br>3<br>9 | 0<br>4<br>4<br>3 | 0<br>7<br>4<br>1 | 0<br>4<br>5<br>0 | 0<br>7<br>4<br>1 | 0<br>4<br>5<br>0 | 0<br>7<br>4<br>1 | 0<br>4<br>5<br>0 | 0<br>7<br>4<br>1 |
| ANIMAL ID  |             |                       |                       |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  |                  | * TOTALS         |
|  |             | 0<br>1<br>7<br>4<br>3 | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>4<br>4 | 0<br>1<br>7<br>4 | 0<br>1<br>5<br>5 | 0<br>1<br>5<br>5 | 0<br>1<br>5<br>5 | 0<br>1<br>5<br>5 | 0<br>1<br>7<br>7 | 0<br>1<br>5<br>5 | 0<br>1<br>7<br>7 | 0<br>1<br>5<br>5 | 0<br>1<br>7<br>7 | 0<br>1<br>5<br>5 | 0<br>1<br>7<br>7 |

**RESPIRATORY SYSTEM**

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Adenocarcinoma, Metastatic, Mammary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma, Metastatic, Adrenal Cortex     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Carcinoma, Metastatic, Thyroid Gland      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
| Nose                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymphoma Malignant                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |
| Trachea                                   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 89 |
| Carcinoma, Metastatic, Thyroid Gland      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |

**SPECIAL SENSES SYSTEM**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
| Ear                | + |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Neural Crest Tumor |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Eye                | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 88 |   |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Harderian Gland    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |   |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |

**URINARY SYSTEM**

|                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|--------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Kidney             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Lymphoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

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A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>3.0W/kg(CDMA)chr | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | * TOTALS |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|----------|
|  |                       | 0<br>7<br>4<br>5      | 0<br>7<br>3<br>9      | 0<br>4<br>6<br>4      | 0<br>7<br>4<br>0      | 0<br>7<br>1<br>1      | 0<br>7<br>4<br>4      | 0<br>7<br>3<br>1      | 0<br>7<br>3<br>8      | 0<br>7<br>9<br>9      | 0<br>4<br>3<br>3      | 0<br>7<br>9<br>3      | 0<br>4<br>4<br>1      | 0<br>7<br>5<br>0      | 0<br>4<br>5<br>0      | 0<br>7<br>4<br>1      |          |
| ANIMAL ID  | 0<br>1<br>7<br>4<br>3 | 0<br>1<br>1<br>4<br>4 | 0<br>1<br>7<br>4<br>7 | 0<br>1<br>7<br>5<br>9 | 0<br>1<br>7<br>5<br>1 | 0<br>1<br>7<br>5<br>2 | 0<br>1<br>7<br>4<br>4 | 0<br>1<br>7<br>5<br>6 | 0<br>1<br>7<br>5<br>6 | 0<br>1<br>7<br>5<br>6 | 0<br>1<br>7<br>5<br>7 | 0<br>1<br>7<br>5<br>8 | 0<br>1<br>7<br>5<br>9 | 0<br>1<br>7<br>6<br>0 | 0<br>1<br>7<br>7<br>7 | 0<br>1<br>1<br>1<br>1 |          |
| Bilateral, Renal Tubule, Carcinoma                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2                     |          |
| Perirenal Tissue, Lymphoma Malignant                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
| Renal Tubule, Adenoma                                    |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1                     |          |
| Urinary Bladder  | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90       |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 1        |
| <b>SYSTEMIC LESIONS</b>                                  |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |          |
| Multiple Organ   | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | 90       |
| Histiocytic Sarcoma                                      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 2        |
| Lymphoma Malignant                                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       | 4        |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56  
 Test Type: CHRONIC  
 Route: Whole Body Exposure  
 Species/Strain: RATS/HSD

### P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018  
 Time Report Requested: 13:31:21  
 First Dose M/F: 09/16/12 / 09/16/12  
 Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID  | 7           | 6 | 7 | 7 | 7 | 7 | 6 | 7 | 6 | 7 | 5 | 7 | 4 | 7 | 4 | 3 | 8 | 7 | 1 | 1 | 3 | 1 | 4 | 8 | 0 |
|  | 8           | 6 | 4 | 0 | 7 | 9 | 0 | 8 | 7 | 1 | 1 | 3 | 1 | 4 | 8 | 0 | 7 | 7 | 7 | 7 | 5 | 7 | 4 | 9 | 0 |

females  
(cont...)

### ALIMENTARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Esophagus   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Cecum  | + | A | + | + | + | + | + | A | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Colon<br>Lymphoma Malignant                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Duodenum   | + | A | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Ileum  | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Jejunum  | + | A | + | + | + | + | + | A | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Liver<br>Hepatocellular Adenoma<br>Hepatocellular Carcinoma<br>Lymphoma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Mesentery   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Pancreas<br>Lymphoma Malignant  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Salivary Glands<br>Lymphoma Malignant<br>Parotid Gland, Squamous Cell Carcinoma   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

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A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr                            | DAY ON TEST |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |
|---|-------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|---|---|
|   |             | 0<br>7<br>3<br>8      | 0<br>6<br>9<br>6      | 0<br>7<br>4<br>4      | 0<br>7<br>3<br>0      | 0<br>6<br>3<br>8      | 0<br>7<br>3<br>7      | 0<br>6<br>5<br>1      | 0<br>7<br>4<br>1      | 0<br>5<br>3<br>3      | 0<br>7<br>4<br>8      | 0<br>7<br>4<br>0      | 0<br>5<br>5<br>7      | 0<br>7<br>3<br>7      | 0<br>7<br>4<br>5      | 0<br>7<br>3<br>9      | 0<br>5<br>4<br>0      | 0<br>6<br>2<br>6      | 0<br>5<br>2<br>0      | 0<br>7<br>4<br>2      | 0<br>5<br>2<br>2      |                       |                       |   |   |
| ANIMAL ID   |             | 0<br>1<br>8<br>6<br>6 | 0<br>1<br>1<br>6<br>6 | 0<br>1<br>1<br>6<br>6 | 0<br>1<br>8<br>7<br>7 |   |   |
| Lymphoma Malignant  |             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |   |   |
| Parathyroid Gland   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |
| Pituitary Gland<br>Pars Distalis, Adenoma   |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |
| Thyroid Gland<br>Bilateral, C-cell, Adenoma<br>C-cell, Adenoma<br>C-cell, Carcinoma |             | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | + | + |

## GENERAL BODY SYSTEM

|   |   |
|---|---|
| Tissue NOS  | + |
| Clitoral Gland<br>Lymphoma Malignant<br>Schwannoma Malignant                                    | + |
| Ovary<br>Lymphoma Malignant<br>Periovarian Tissue, Schwannoma Malignant<br>Rete Ovarii, Adenoma | + |
| Uterus<br>Adenocarcinoma<br>Adenoma<br>Lymphoma Malignant                                       | + |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|                                      | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE<br>6.0W/kg(CDMA)chr |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | females<br>(cont...) |   |
|--------------------------------------|-------------|---|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------------------|---|
|                                      |             | 0738  | 0638 | 0746 | 0744 | 0733 | 0734 | 0630 | 0730 | 0637 | 0741 | 0531 | 0743 | 0531 | 0744 | 0538 | 0740 | 0537 | 0737 | 0537 | 0745 | 0539 | 0740 | 0526 | 0740 | 0522                 |   |
|                                      | ANIMAL ID   | 0000  | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000 | 0000                 |   |
| Mammary Gland                        |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| Adenocarcinoma                       |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      | X |
| Adenocarcinoma, Multiple             |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      | X |
| Adenoma                              |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      | X |
| Fibroadenoma                         |             | X   | X    |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Fibroadenoma, Multiple               |             | X   | X    | X    | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      | X |
| Lymphoma Malignant                   |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Skin                                 |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| Keratoacanthoma                      |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      | X |
| Squamous Cell Carcinoma, Metastatic, |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Salivary Glands                      |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Subcutaneous Tissue, Fibroma         |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Subcutaneous Tissue, Lipoma          |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Vulva, Squamous Cell Carcinoma       |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| <b>MUSCULOSKELETAL SYSTEM</b>        |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Bone                                 |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| Skeletal Muscle                      |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| <b>NERVOUS SYSTEM</b>                |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Brain                                |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| Lymphoma Malignant                   |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Meningioma Malignant                 |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Meninges, Granular Cell Tumor Benign |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      | X |
| Nerve Trigeminal                     |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | M    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | M                    |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## RESPIRATORY SYSTEM

Lung

## Adenocarcinoma, Metastatic, Mammary Gland Lymphoma Malignant

## Nose

## Lymphoma Malignant

## Trachea

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

### I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID  | 7           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 5 | 6 | 7 | 7 | 7 | 7 | 7 | 5 | 4 | 7 | 7 | 7 | 7 | 7 |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|  | 8           | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
|  | 9           | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 |
|  | 6           | 7 | 8 | 9 | 1 | 2 | 3 | 5 | 6 | 7 | 8 | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 5 |
|  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

females  
(cont...)

## ALIMENTARY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Esophagus   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Cecum  | + | + | + | + | + | + | + | + | + | + | + | A | A | + | + | A | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Colon<br>Lymphoma Malignant                                      | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Large, Rectum   | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Duodenum   | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Ileum  | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | + |  |
| Intestine Small, Jejunum  | + | + | + | + | + | + | + | + | + | + | + | A | A | + | + | A | + | + | + | + | + | + | + | + | + |  |
| Liver<br>Hepatocellular Adenoma<br>Hepatocellular Carcinoma<br>Lymphoma Malignant | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Mesentery   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   | X |   |   |   |   |   |   |   |   |   |  |
| Pancreas<br>Lymphoma Malignant  | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Salivary Glands<br>Lymphoma Malignant<br>Parotid Gland, Squamous Cell Carcinoma   | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST |     | HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     |     | females<br>(cont...) |
|-------------|-----|--|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|----------------------|
| ANIMAL ID   | 0   | 0  | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   | 0   |                      |
| 072         | 079 | 074  | 041 | 044 | 077 | 073 | 078 | 044 | 078 | 079 | 090 | 074 | 071 | 077 | 078 | 074 | 050 | 041 | 073 | 079 | 074 |                      |
| 118         | 118 | 118  | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 | 119 |                      |
| 219         | 218 | 219  | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 200 | 202 | 202 | 202 | 202 | 202 |                      |
| 316         | 317 | 318  | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 | 319 |                      |
| 417         | 418 | 419  | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 | 419 |                      |
| 516         | 517 | 518  | 519 | 519 | 519 | 519 | 519 | 519 | 519 | 519 | 519 | 519 | 519 | 519 | 519 | 519 | 520 | 521 | 522 | 522 | 523 |                      |
| 617         | 618 | 619  | 619 | 619 | 619 | 619 | 619 | 619 | 619 | 619 | 619 | 619 | 619 | 619 | 619 | 619 | 620 | 621 | 622 | 623 | 624 |                      |

## Lymphoma Malignant

## Parathyroid Gland

Pituitary Gland  
Pars Distalis, Adenoma

Thyroid Gland  
Bilateral, C-cell, Adenoma  
C-cell, Adenoma  
C-cell, Carcinoma

## **GENERAL BODY SYSTEM**

## Tissue NOS

## **GENITAL SYSTEM**

Clitoral Gland  
Lymphoma Malignant  
Schwannoma Malignant

Ovary  
Lymphoma Malignant  
Periovarian Tissue, Schwannoma Malignant  
Rete Ovarii, Adenoma

Uterus  
Adenocarcinoma  
Adenoma  
Lymphoma Malign

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

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Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|                                      | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE<br>6.0W/kg(CDMA)chr |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    | females<br>(cont...) |  |
|--------------------------------------|-------------|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------------------|--|
|                                      |             | 07  | 07 | 07 | 07 | 07 | 07 | 05 | 07 | 05 | 06 | 07 | 07 | 07 | 05 | 07 | 07 | 07 | 05 | 04 | 07 | 07 | 07 | 07 | 07 |                      |  |
|                                      | ANIMAL ID   | 02  | 03 | 04 | 01 | 04 | 04 | 07 | 08 | 04 | 07 | 08 | 09 | 00 | 01 | 07 | 08 | 00 | 01 | 01 | 01 | 01 | 01 | 01 | 01 | 01                   |  |
| Mammary Gland                        |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Adenocarcinoma                       |             | X   | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  | X  |                      |  |
| Adenocarcinoma, Multiple             |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Adenoma                              |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Fibroadenoma                         |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Fibroadenoma, Multiple               |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Lymphoma Malignant                   |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Skin                                 |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Keratoacanthoma                      |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Squamous Cell Carcinoma, Metastatic, |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Salivary Glands                      |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Subcutaneous Tissue, Fibroma         |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Subcutaneous Tissue, Lipoma          |             | X   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Vulva, Squamous Cell Carcinoma       |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| <b>MUSCULOSKELETAL SYSTEM</b>        |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Bone                                 |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Skeletal Muscle                      |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| <b>NERVOUS SYSTEM</b>                |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Brain                                |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +                    |  |
| Lymphoma Malignant                   |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Meningioma Malignant                 |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Meninges, Granular Cell Tumor Benign |             |   |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |                      |  |
| Nerve Trigeminal                     |             | +   | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | +  | M  | +  | +  | +  | M  | +  | +  | +  | +  | +  | +  | +  | +                    |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

# **RESPIRATORY SYSTEM**

\* .. Total animals with tissue examined microscopically: Total animals with tumor

M .. Missing tissue

± .. Tissue examined microscopically

A .. Autolysis precludes evaluation

X - Lesion present

BI ANK: Not examined microscopically

X .. Lesion present  
I .. Insufficient tissue

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

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## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

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First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| ANIMAL ID  | 7           | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 5 | 7 | 7 | 5 | 6 | 7 | 7 | 7 | 7 | 5 | 4 | 7 | 7 | 7 | 7 | 7 | 7 |
|  | 0           | 3 | 4 | 1 | 4 | 4 | 4 | 7 | 8 | 4 | 7 | 8 | 3 | 6 | 7 | 4 | 7 | 3 | 5 | 4 | 1 | 7 | 3 | 9 | 0 | 1 |
|  | 2           | 9 | 4 | 1 | 4 | 4 | 7 | 8 | 4 | 7 | 8 | 3 | 9 | 0 | 4 | 1 | 7 | 8 | 0 | 0 | 1 | 7 | 3 | 9 | 0 | 1 |
|  | 0           | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|  | 1           | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|  | 8           | 8 | 8 | 8 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |
|  | 9           | 9 | 9 | 9 | 9 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 2 | 2 | 2 |
|  | 6           | 7 | 8 | 9 | 1 | 2 | 3 | 5 | 6 | 7 | 8 | 0 | 2 | 3 | 4 | 5 | 6 | 7 | 9 | 0 | 1 | 2 | 3 | 4 | 5 |   |

females  
(cont...)

## SPECIAL SENSES SYSTEM

Ear

Neural Crest Tumor

Eye

Lymphoma Malignant

Harderian Gland

Lymphoma Malignant

+ + + + + + + + + + + + + A +

## URINARY SYSTEM

Kidney

Lymphoma Malignant

+ + + + + + + + + + + + + A + X

Urinary Bladder

Lymphoma Malignant

+ +

## SYSTEMIC LESIONS

Multiple Organ

Lymphoma Malignant

+ X X

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Date Report Requested:** 01/02/2018

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| DAY ON TEST                              |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  | 0<br>7<br>3<br>8      | 0<br>7<br>4<br>0      | 0<br>7<br>4<br>9      | 0<br>5<br>3<br>6      | 0<br>7<br>3<br>8      | 0<br>7<br>4<br>1      | 0<br>3<br>0<br>5      | 0<br>4<br>5           | 0<br>7<br>4<br>4      | 0<br>7<br>3<br>9      | 0<br>6<br>7<br>8      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>4      | 0<br>7<br>3<br>2      | 0<br>6<br>8           | 0<br>7<br>8           | 0<br>6<br>0           | 0<br>7<br>4<br>3      | 0<br>7<br>3<br>1      | 0<br>7<br>9<br>5      |                       |
| <b>HARLAN SPRAGUE DAWLEY RATS FEMALE</b> |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |
| <b>6.0W/kg(CDMA)chr</b>                  | 0<br>1<br>9<br>2<br>6 | 0<br>1<br>9<br>2<br>7 | 0<br>1<br>9<br>2<br>8 | 0<br>1<br>9<br>3<br>0 | 0<br>1<br>9<br>3<br>1 | 0<br>1<br>9<br>3<br>2 | 0<br>1<br>9<br>3<br>3 | 0<br>1<br>9<br>3<br>4 | 0<br>1<br>9<br>3<br>5 | 0<br>1<br>9<br>3<br>7 | 0<br>1<br>9<br>3<br>8 | 0<br>1<br>9<br>4<br>0 | 0<br>1<br>9<br>4<br>2 | 0<br>1<br>9<br>4<br>3 | 0<br>1<br>9<br>4<br>4 | 0<br>1<br>9<br>4<br>5 | 0<br>1<br>9<br>4<br>6 | 0<br>1<br>9<br>4<br>7 | 0<br>1<br>9<br>4<br>8 | 0<br>1<br>9<br>4<br>9 | 0<br>1<br>9<br>5<br>1 |
| ANIMAL ID                                | 0<br>1<br>9<br>2<br>6 | 0<br>1<br>9<br>2<br>7 | 0<br>1<br>9<br>2<br>8 | 0<br>1<br>9<br>3<br>0 | 0<br>1<br>9<br>3<br>1 | 0<br>1<br>9<br>3<br>2 | 0<br>1<br>9<br>3<br>3 | 0<br>1<br>9<br>3<br>4 | 0<br>1<br>9<br>3<br>5 | 0<br>1<br>9<br>3<br>7 | 0<br>1<br>9<br>3<br>8 | 0<br>1<br>9<br>4<br>0 | 0<br>1<br>9<br>4<br>2 | 0<br>1<br>9<br>4<br>3 | 0<br>1<br>9<br>4<br>4 | 0<br>1<br>9<br>4<br>5 | 0<br>1<br>9<br>4<br>6 | 0<br>1<br>9<br>4<br>7 | 0<br>1<br>9<br>4<br>8 | 0<br>1<br>9<br>4<br>9 | 0<br>1<br>9<br>5<br>2 |

## **ALIMENTARY SYSTEM**

|  |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|--|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| Esophagus                                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |   |
| Intestine Large, Cecum                       | + | + | + | + | + | A | + | + | + | + | + | + | + | A | + | + | + | + | + | A | + | + | A |
| Intestine Large, Colon<br>Lymphoma Malignant | + | + | + | + | + | A | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Large, Rectum                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Duodenum                    | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Intestine Small, Ileum                       | + | + | + | + | + | A | + | + | + | A | + | + | + | + | + | + | + | + | A | + | + | + | + |
| Intestine Small, Jejunum                     | + | + | + | + | + | A | + | + | + | + | + | + | + | A | + | + | + | + | A | + | + | A | + |
| Liver  | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Hepatocellular Adenoma                       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Hepatocellular Carcinoma                     |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Lymphoma Malignant                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Mesentery                                    |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Pancreas                                     | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Salivary Glands                              | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |
| Lymphoma Malignant                           |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
| Parotid Gland, Squamous Cell Carcinoma       |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

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Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr | DAY ON TEST             |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|--|-------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
|  |                         | 0<br>7<br>3<br>8      | 0<br>7<br>4<br>0      | 0<br>7<br>3<br>9      | 0<br>7<br>4<br>4      | 0<br>7<br>3<br>8      | 0<br>7<br>1<br>1      | 0<br>7<br>4<br>1      | 0<br>7<br>5<br>5      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>9      | 0<br>7<br>8<br>5      | 0<br>7<br>4<br>4      | 0<br>7<br>2<br>2      | 0<br>7<br>8<br>8      | 0<br>6<br>6<br>8      | 0<br>6<br>4<br>3      | 0<br>7<br>1<br>1      |                       |                       |  |
| ANIMAL ID  |                         | 0<br>1<br>9<br>2<br>6 | 0<br>1<br>9<br>2<br>7 | 0<br>1<br>9<br>2<br>8 | 0<br>1<br>9<br>2<br>9 | 0<br>1<br>9<br>3<br>0 | 0<br>1<br>9<br>3<br>1 | 0<br>1<br>9<br>3<br>2 | 0<br>1<br>9<br>3<br>3 | 0<br>1<br>9<br>3<br>4 | 0<br>1<br>9<br>3<br>5 | 0<br>1<br>9<br>3<br>6 | 0<br>1<br>9<br>3<br>7 | 0<br>1<br>9<br>3<br>8 | 0<br>1<br>9<br>3<br>9 | 0<br>1<br>9<br>4<br>0 | 0<br>1<br>9<br>4<br>1 | 0<br>1<br>9<br>4<br>2 | 0<br>1<br>9<br>4<br>3 | 0<br>1<br>9<br>4<br>4 | 0<br>1<br>9<br>4<br>5 | 0<br>1<br>9<br>4<br>6 | 0<br>1<br>9<br>4<br>7 | 0<br>1<br>9<br>4<br>8 | 0<br>1<br>9<br>4<br>9 | 0<br>1<br>9<br>5<br>0 |  |
|  | Stomach, Forestomach    | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |  |
|  | Lymphoma Malignant      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|  | Sarcoma                 |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|  | Squamous Cell Papilloma |                       |                       |                       |                       |                       | X                     |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|  | Stomach, Glandular      | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     | +                     |  |
|  | Lymphoma Malignant      |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |

## CARDIOVASCULAR SYSTEM

|                                   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-----------------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Aorta                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Blood Vessel                      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Heart                             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Lymphoma Malignant                |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Endocardium, Schwannoma Malignant |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

## ENDOCRINE SYSTEM

|                         |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
|-------------------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|
| Adrenal Cortex          | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adenoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Lymphoma Malignant      |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Adrenal Medulla         | + | + | + | + | I | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Pheochromocytoma Benign |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Islets, Pancreatic      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + |  |
| Adenoma                 |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |
| Carcinoma               |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |  |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

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Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|                                      | DAY ON TEST | HARLAN SPRAGUE DAWLEY RATS FEMALE<br>6.0W/kg(CDMA)chr |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | females<br>(cont...) |   |
|--------------------------------------|-------------|---|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|------|----------------------|---|
|                                      |             | 0738  | 0740 | 0749 | 0744 | 0746 | 0748 | 0751 | 0758 | 0761 | 0765 | 0771 | 0774 | 0778 | 0785 | 0794 | 0799 | 0799 | 0799 | 0799 | 0799 | 0799 | 0799 | 0799 | 0799 | 0799 |                      |   |
|                                      | ANIMAL ID   | 0199  | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 | 0199 |                      |   |
| Mammary Gland                        |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| Adenocarcinoma                       |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |                      |   |
| Adenocarcinoma, Multiple             |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Adenoma                              |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |                      |   |
| Fibroadenoma                         |             | X   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | X    | X    |      |      |      |      |      |                      |   |
| Fibroadenoma, Multiple               |             |   | X    | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | X    | X    |      |      |      |      |      |                      |   |
| Lymphoma Malignant                   |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | X    |      |      |      |                      | X |
| Skin                                 |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| Keratoacanthoma                      |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Squamous Cell Carcinoma, Metastatic, |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      | X |
| Salivary Glands                      |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Subcutaneous Tissue, Fibroma         |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |                      |   |
| Subcutaneous Tissue, Lipoma          |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      | X    | X    | X    |      |      |      |      |      |                      |   |
| Vulva, Squamous Cell Carcinoma       |             |   |      |      |      |      |      | X    |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| <b>MUSCULOSKELETAL SYSTEM</b>        |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Bone                                 |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| Skeletal Muscle                      |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| <b>NERVOUS SYSTEM</b>                |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Brain                                |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |
| Lymphoma Malignant                   |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Meningioma Malignant                 |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Meninges, Granular Cell Tumor Benign |             |   |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |      |                      |   |
| Nerve Trigeminal                     |             | +   | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +    | +                    |   |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

## **RESPIRATORY SYSTEM**

Lung

Adenocarcinoma, Metastatic, Mammary Gland  
Lymphoma Malignant

## Nose

## Lymphoma Malignant

## Trachea

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

#### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

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## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr |                       | DAY ON TEST           |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |  |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|--|
| ANIMAL ID  | 0<br>6<br>6<br>9      |                       | 0<br>7<br>4<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>0<br>2      | 0<br>7<br>4<br>0      | 0<br>6<br>9<br>4      | 0<br>7<br>3<br>8      | 0<br>6<br>3<br>3      | 0<br>5<br>7<br>9      | 0<br>7<br>4<br>5      |  |
| 0<br>1<br>9<br>5<br>4                                    | 0<br>1<br>9<br>5<br>5 | 0<br>1<br>9<br>5<br>6 | 0<br>1<br>9<br>5<br>8 | 0<br>1<br>9<br>9<br>9 | 0<br>1<br>9<br>6<br>0 | 0<br>1<br>9<br>6<br>1 | 0<br>1<br>9<br>6<br>2 | 0<br>1<br>9<br>6<br>3 | 0<br>1<br>9<br>6<br>4 | 0<br>1<br>9<br>6<br>5 | 0<br>1<br>9<br>6<br>7 | 0<br>1<br>9<br>6<br>8 | 0<br>1<br>9<br>6<br>9 | 0<br>1<br>9<br>6<br>7 | 0<br>1<br>9<br>6<br>8 | 0<br>1<br>9<br>6<br>9 | 0<br>1<br>9<br>7<br>0 |  |

# ALIMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

### I .. Insufficient tissue

M .. Missing tissue

#### A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr | ANIMAL ID   | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 5 | 7 | 7 | 7 | 7 |          |
|  |             | 6 | 3 | 4 | 3 | 1 | 0 | 2 | 4 | 9 | 3 | 3 | 7 | 4 | 4 | 5 | 5 |          |
|  |             | 9 | 9 | 1 | 8 | 1 | 2 | 0 | 0 | 4 | 8 | 9 | 3 | 9 | 5 | 5 | 5 |          |
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|  |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |          |
|  |             | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |          |
|  |             | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |          |
|  |             | 4 | 5 | 6 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 7 | 8 | 9 | 9 | 0 |          |
| Stomach, Forestomach                                     |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 2        |
| Sarcoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Squamous Cell Papilloma                                  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Stomach, Glandular                                       |             | + | + | + | + | + | + | + | + | + | + | A | + | + | + | + | + | 88       |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | 1        |
| <b>CARDIOVASCULAR SYSTEM</b>                             |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Aorta  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Blood Vessel   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Heart  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   |   | 2        |
| Endocardium, Schwannoma Malignant                        |             |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 2        |
| <b>ENDOCRINE SYSTEM</b>                                  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Adrenal Cortex   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Adenoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   | X |   |   |   |   |   |   |   | 2        |
| Adrenal Medulla  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 88       |
| Pheochromocytoma Benign                                  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4        |
| Islets, Pancreatic                                       |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 88       |
| Adenoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 4        |
| Carcinoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2        |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically



Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|---|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0  |   |
| ANIMAL ID  | 6           | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 7 | 6 | 5 | 7 | 7 | 7 | 7  |   |
|  | 6           | 3 | 4 | 3 | 1 | 0 | 2 | 4 | 9 | 3 | 3 | 3 | 7 | 4 | 4 | 5 | 5  |   |
|  | 9           | 9 | 1 | 8 | 1 | 2 | 0 | 0 | 4 | 8 | 9 | 3 | 9 | 5 | 5 | 5 | 5  |   |
| Polyp Stromal  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  |   |
| Polyp Stromal, Multiple                                  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | X  |   |
| Vagina   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
| <b>* TOTALS</b>  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
| Bone Marrow  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 12 |   |
| Lymph Node   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 5 |
| Iliac, Adenocarcinoma, Metastatic, Mammary Gland         |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Iliac, Lymphoma Malignant                                |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Lumbar, Lymphoma Malignant                               |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 1 |
| Mediastinal, Lymphoma Malignant                          |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| Renal, Lymphoma Malignant                                |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| Lymph Node, Mandibular Lymphoma Malignant                |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |   |
|  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| X  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
| Lymph Node, Mesenteric Lymphoma Malignant                |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 89 |   |
|  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| X  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
| Spleen   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |   |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 3 |
| X  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |
| Thymus   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 87 |   |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    | 2 |
| X  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |   |

## INTEGUMENTARY SYSTEM

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr | ANIMAL ID   | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 5 | 7 | 7 | 7 | 7 |          |
|  |             | 6 | 3 | 4 | 3 | 1 | 0 | 2 | 4 | 9 | 3 | 3 | 7 | 4 | 4 | 5 | 5 |          |
|  |             | 9 | 9 | 1 | 8 | 1 | 2 | 0 | 0 | 4 | 8 | 9 | 3 | 9 | 5 | 5 | 5 |          |
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|  |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |          |
|  |             | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |          |
|  |             | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |          |
|  |             | 4 | 5 | 6 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 7 | 8 | 9 | 9 | 0 |          |
| Mammary Gland  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Adenocarcinoma   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3        |
| Adenocarcinoma, Multiple                                 |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Adenoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2        |
| Fibroadenoma   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 32       |
| Fibroadenoma, Multiple                                   |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 30       |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Skin   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Keratoacanthoma  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Squamous Cell Carcinoma, Metastatic,                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Salivary Glands  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Subcutaneous Tissue, Fibroma                             |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3        |
| Subcutaneous Tissue, Lipoma                              |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2        |
| Vulva, Squamous Cell Carcinoma                           |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| <b>MUSCULOSKELETAL SYSTEM</b>                            |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Bone   |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Skeletal Muscle  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| <b>NERVOUS SYSTEM</b>                                    |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |          |
| Brain  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Lymphoma Malignant                                       |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Meningioma Malignant                                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Meninges, Granular Cell Tumor Benign                     |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 2        |
| Nerve Trigeminal   |             | + | + | + | + | + | + | + | + | + | + | + | M | + | + | + | + | 84       |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

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A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

Experiment Number: 20105 - 56

Test Type: CHRONIC

Route: Whole Body Exposure

Species/Strain: RATS/HSD

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

Cell Phone Radiation: CDMA

CAS Number: CELLPRADCDMA

Date Report Requested: 01/02/2018

Time Report Requested: 13:31:21

First Dose M/F: 09/16/12 / 09/16/12

Lab: IIT

|  | DAY ON TEST |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | * TOTALS |
|--|-------------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----------|
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr                       |             | 6 | 7 | 7 | 7 | 7 | 7 | 7 | 6 | 7 | 7 | 6 | 5 | 7 | 7 | 7 | 7 |          |
|  | ANIMAL ID   | 6 | 3 | 4 | 3 | 1 | 0 | 2 | 4 | 9 | 3 | 3 | 7 | 4 | 4 | 5 | 5 |          |
|  |             | 9 | 9 | 1 | 8 | 1 | 2 | 0 | 0 | 4 | 8 | 9 | 3 | 9 | 5 | 5 | 5 |          |
|  |             | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |          |
|  |             | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |          |
|  |             | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 | 9 |          |
|  |             | 5 | 5 | 5 | 5 | 5 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 6 | 7 |          |
|  |             | 4 | 5 | 6 | 8 | 9 | 0 | 1 | 2 | 3 | 4 | 5 | 7 | 8 | 9 | 9 | 0 |          |
| Squamous Cell Carcinoma, Metastatic,<br>Salivary Glands                        |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Peripheral Nerve, Sciatic  |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
| Peripheral Nerve, Tibial   |             | + | + | + | + |   | + | + | + | + | + | + | + | + | + | + | + | 89       |
| Spinal Cord, Cervical<br>Lymphoma Malignant                                    |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
|  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Spinal Cord, Lumbar<br>Lymphoma Malignant                                      |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
|  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Spinal Cord, Thoracic<br>Lymphoma Malignant                                    |             | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90       |
|  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |
| Trigeminal Ganglion<br>Squamous Cell Carcinoma, Metastatic,<br>Salivary Glands |             | + | + | + | + | + | + | M | M | + | + | + | + | + | + | + | + | 75       |
|  |             |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1        |

## RESPIRATORY SYSTEM

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|----|
| Lung                                      | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | + | 90 |
| Adenocarcinoma, Metastatic, Mammary Gland |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 1  |
| Lymphoma Malignant                        |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   | 3  |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |    |
| Nose                                      | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + |   |   | 89 |
| Lymphoma Malignant                        |   |   |   |   |   |   |   |   |   |   |   | X |   |   |   |   |   | 1  |
| Trachea                                   | + | + | + | + | + | + | + | + | + | + | + | A | + | + | + |   |   | 89 |

\* .. Total animals with tissue examined microscopically; Total animals with tumor

+ .. Tissue examined microscopically

X .. Lesion present

I .. Insufficient tissue

M .. Missing tissue

A .. Autolysis precludes evaluation

BLANK .. Not examined microscopically

**Experiment Number:** 20105 - 56

## P04: NEOPLASMS BY INDIVIDUAL ANIMAL

**Date Report Requested:** 01/02/2018

**Test Type: CHRONIC**

**Route:** Whole Body Exposure

**Species/Strain:** RATS/HSD

## Cell Phone Radiation: CDMA

**CAS Number:** CELLPRADCDMA

**Time Report Requested:** 13:31:21

**First Dose M/F:** 09/16/12 / 09/16/12

Lab: IIT

| HARLAN SPRAGUE DAWLEY RATS<br>FEMALE<br>6.0W/kg(CDMA)chr | DAY ON TEST | ANIMAL ID |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                       |                  |                  |
|--|-------------|-----------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|------------------|------------------|
|  |             |           | 0<br>6<br>6<br>9      | 0<br>7<br>4<br>9      | 0<br>7<br>3<br>1      | 0<br>7<br>0<br>2      | 0<br>7<br>2<br>0      | 0<br>7<br>4<br>0      | 0<br>6<br>9<br>4      | 0<br>7<br>3<br>8      | 0<br>7<br>3<br>9      | 0<br>6<br>3<br>3      | 0<br>5<br>7<br>9      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>5      | 0<br>7<br>4<br>5 | 0<br>7<br>4<br>5 |
|  |             |           | 0<br>1<br>9<br>5<br>4 | 0<br>1<br>9<br>5<br>5 | 0<br>1<br>9<br>5<br>6 | 0<br>1<br>9<br>6<br>0 | 0<br>1<br>9<br>6<br>1 | 0<br>1<br>9<br>6<br>2 | 0<br>1<br>9<br>6<br>3 | 0<br>1<br>9<br>6<br>4 | 0<br>1<br>9<br>6<br>5 | 0<br>1<br>9<br>6<br>6 | 0<br>1<br>9<br>6<br>7 | 0<br>1<br>9<br>6<br>8 | 0<br>1<br>9<br>6<br>9 | 0<br>1<br>9<br>7<br>0 |                  |                  |

## **SPECIAL SENSES SYSTEM**

## **URINARY SYSTEM**

## **SYSTEMIC LESIONS**

Multiple Organ Lymphoma Malignant + + + + + + + + + + + + + + + + + + + X 90 3

\*\*\* END OF REPORT \*\*\*

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+ .. Tissue examined microscopically

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#### I .. Insufficient tissue

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